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ABSTRACT

This practicum involved an effort to improve the quality of infant/toddler care and education in a family dayhome setting. An attempt was made to increase the dayhome administrator's and parents' knowledge of infant/toddler development, age appropriate curriculum/material selection and parent/school communication. Direct observation of family dayhome programs, perusal of available lesson plans, and administration of a needs assessment survey revealed parents' desires to be actively involved in the dayhome program in ways that accommodated both the dayhome's needs and the lifestyles of the parents. Four intensive inservice sessions were conducted. Each session had an independent study and supplemental reading component which permitted the participant to set and meet individual goals. The inservice sessions covered infant/toddler development, assessment and age appropriate curriculum/materials selection, health, nutrition, and the importance of play and fostering parent/caregiver partnerships. Each session was supplemented with three follow-up newsletters designed to provide the parent with child development information and home activities presented at each inservice session. Practicum evaluation data indicated that the intervention resulted in increased provision of developmentally appropriate learning experiences in the dayhome setting. Sample forms, observation sheets, lesson plan, newsletters, and inservice session agendas are appended. (Author/RH)

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IMPLEMENTATION OF AN INFANT/TODDLER INSERVICE PROGRAM FOR DAYHOME STAFF AND PARENTS

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NOVA UNIVERSITY

Implementation of an Infant/Toddler Inservice Program for Dayhome Staff and Parents

Practicum I

by

Geraldine Harmon

Cluster XIV

PS 015831

A Practicum Report Presented to the Ed.D. Program
in Early Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

Nova University

August, 1985

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PRACTICUM APPROVAL SHEET

This practicum took place as described.

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Approved:

11/5/85
Date of Final Approval of

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ABSTRACT

Implementation of an Infant/Toddler Inservice Program for Dayhome Staff and Parents. Harmon, Geraldine, 1985: Practicum Report, Nova University Ed.D. Program in Early Childhood
Descriptors: Early Childhood Education/Preschool Education/Child Development Centers/Day Care Centers/Young Children/Infant Education/ Parent Workshops/Staff Development/Inservice Teacher Education/Parent Education/Learning Activities/Infancy

The practicum involved an effort to improve the quality of infant/ toddler care and education in a family dayhome setting. An attempt was made to increase the dayhome administrator's and parent's knowledge of infant/toddler development, age appropriate curriculum/material selection and parent/school communication. Direct observation of family dayhome programs, perusal of available lesson plans and administration of a needs assessment survey indicated a problem existed.

Four intensive inservice sessions were conducted. Each session had an independent study and supplemental reading component which permitted the participant to set and meet individual goals. The inservice sessions covered infant/toddler development, assessment and age appropriate curriculum/material selection, health, nutrition and the importance of play and fostering parent/caregiver partnerships. Each session was supplemented with three follow-up newsletters designed to provide the parent with child development information and home activities presented at each inservice session.

Upon completion of the implementation phase of the practicum, data from the evaluation instruments was analyzed. It was found that by increasing the dayhome administrator's knowledge of infant/toddler care and education, family dayhome staff and parents began providing developmentally appropriate learning experiances.

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CHAPTER I

INTRODUCTION

Description of Community

Gary is a predominantly black, inner city community of approximately 175,000 residents. The city is located within Lake County in the extreme northwest corner of the state of Indiana on Lake Michigan.

Although Gary has some diversified businesses, it is essentially a one industry city and has periodically suffered when steel production has declined or during labor disputes. Recent problems in the steel industry have devastated the county. Lake County is one of two counties that continue to lead the state in joblessness. Northwest Indiana lead the state in unemployment as 1984 began with an unadjusted unemployment rate of 17.5%. Figures released by the Indiana Employment Security Division in August of 1984 reported approximately 34,300 residents out of work.

A study sponsored in part by Local 65 of the United Steelworkers of America and the Hull House Association attempted to measure the impact of long-term layoffs and subsequent unemployment at the South Works plant of United States Steel. The key findings of the study were:

- Median income has dropped from $20,000 - $24,000 to $10,000 - $14,000 since 1979.
- Current unemployment is 47%; 30% for whites and 60% for blacks. Only 31% of those laid off have found full-time jobs.
- 24% have been forced to move because of reduced income; 38% have fallen behind in monthly payments; 10% have been evicted.

- 26% have been forced to sell automobiles, while 14% have had their automobiles repossessed.
- 30% have no health insurance; 59% have post poned treatment for financial reasons.
- Many now suffer from anxiety, depression, family strife, insominia and are prone to violence.

Gary is also the seat of the Indiana University Northwest Campus yet is representative of some of the most educationally disadvantaged students in the state. Standardized test scores reveal reading, math and vocabulary performance that remains consistently below the national norm. A multitude of educational programs have been instituted in an attempt to prevent and correct further educational decay.

Infancy is considered to be a crucial period since the brain is most sensitive to modification during the first years (Bloom, 1964). Therefore, resources and energies must be marshalled to ensure excellence in training any personnel who care for children during the early critical years. Following this focus, the writer targeted licensed family dayhomes as the practicum setting and infants and toddlers as the target population.

A listing of all licensed family dayhome providers was obtained from the Department of Public Welfare, the local licensing agency. Five family dayhomes, licensed to care for from 6 to 10 children, were randomly selected as possible participants. Each of the dayhome administrators was contacted by letter (Appendix A) and invited to participate in the practicum. Wee Folks Nursery was the first dayhome to respond to the invitation. Following an onsite visit for the

purpose of completing a facility observation sheet (Appendix B) and a needs assessment interview (Appendix C) with the dayhome administrator, Wee Folks Nursery was accepted as the practicum site. Each of the remaining four dayhomes and three additional dayhomes expressed, at a later date, a desire to participate in the practicum and were accepted as inservice session participants.

The information gathered during the needs assessment interview revealed that the dayhome administrator is a 42 year old, black, female. She is the mother of two young adults and operates Wee Folks Nursery in the home she and her husband share. She completed three years of college training in the liberal arts area focusing specifically on social work. Prior to opening the dayhome, she worked with handicapped children at the state run Illinois Children's Hospital School and Sears, Roebuck & Company in Merrillville, Indiana.

The dayhome employs two staff caregivers in addition to the dayhome administrator. The full time caregiver is a 28 year old, black, female who holds a B.A. degree in data processing. The part-time caregiver is a 20 year old, black, female high school graduate.

The dayhome is licensed by the Indiana Department of Public Welfare which has standards for the physical facility, health, safety and nutrition procedures.

The dayhome administrator readily related the goals, needs and interests of the dayhome staff. Keeping abreast of new techniques in the field and implementing those techniques into the dayhome setting were the stated immediate and long range goals. The most pressing

immediate and long range need of the dayhome was money for materials and supplies. The dayhome administrator listed keeping the dayhome program going, keeping good parent communication and keeping the quality of service high at all times as the immediate interests of the dayhome staff and opening a top quality daycare center as her long range interest.

Parents were asked to complete a Background/Proposed Topic Questionnaire (Appendix E). The information gathered from the data received revealed that the dayhome parents are from various ethnic backgrounds. Most of the parents are married and range in age from 19 to 35 years. The educational background of the parents ranged from high school incomplete to college degree, with the majority of the respondents being high school graduates. The number of children in the household ranged from one to four children with most households having only one child. Two of the 15 parents had participated in previous parent training classes yet none of the parents had participated in child development training classes. All parents indicated an interest in at least one of the inservice topics listed.

Writer's Work Setting and Role

The writer is a licensed Speech/Language Pathologist in the Communication Handicapped Program of the Gary Community School Corporation. The Communication Handicapped Program is a clinical/instructional program designed to address the problems of students who are handicapped academically, socially, personally or emotionally by deficits in the areas of voice, fluency, articulation, language or auditory skills.

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The writer services two elementary schools with a total population of 2,067 students. The therapy caseload is comprised of 96 students who exhibit mild to severe delays or differences in the areas of articulation, language processing, language production, auditory processing, voice and/or fluency.

The curriculum design for the Communication Handicapped Program emphasizes meeting the total therapy needs of students through the following overall program objectives:

1. To utilize the established screening/referral process to identify those children who may be in need of speech/language therapy services.

2. To submit appropriate referrals for medical or other professional services required for habilitation of speech/language disorders.

3. To have primary responsibility for provision of diagnosis and appraisal of specific speech/language disorders.

4. To provide direct clinical/instructional therapy services necessary for the habilitation of specific communication disorders.

5. To provide consultative services to students, parents, teachers and other appropriate staff personnel regarding specific communication disorders.

CHAPTER II

STUDY OF THE PROBLEM

Statement of the Problem

Dayhomes licensed by the local welfare department did not have age appropriate curriculum or material guides with such information provided. The time spent at the dayhome was basically babysitting yet could have been used to enhance the overall development of each child.

Basic infant/toddler care in dayhomes has been offered for many years yet infant/toddler education is a fairly new phenomenon in this industrial town and the United States. According to a 1970 survey conducted by the Cyesis Programs Consortium of Washington, D.C., only one infant program existed before 1960. Recognition of the importance of a child's earliest years helped to produce the infant intervention programs of the mid-1960's. Programs developed for infants, toddlers and parents have occurred primarily since 1967 (Cryan, Surbeck, 1979).

The dayhome administrator and staff had not received training in infant/toddler development and education. When an onsite observation was conducted, the writer noted many activities and materials were not age appropriate. Also noted was the absence of early childhood education references, professional journals, newsletters and curriculum guides in the dayhomes for staff and parent use.

Parents were described by the dayhome administrator as very active and cooperative. Dayhome programs and field trips were the

most often cited activities. Outside of these activities, very little parent involvement could be documented.

Briefly stated, the problem was the absence of age appropriate caregiver training, curriculum, materials and very little parent involvement in licensed dayhomes in the Gary, Indiana area.

Documentation of the Problem

Dayhome staff and parents were asked to complete a Background/ Proposed Topic questionnaire. Information obtained from the questionnaire revealed two of 18 respondents had previously participated in parenting classes. None of the respondents had received information on or participated in infant/toddler developmental training classes. All staff and parents indicated an interest in at least one of 24 inservice topics listed. The inservice topics generating the most interest in order of frequency of selection were:

- infant/toddler curriculum (what to teach, how to teach, when to teach)
- working mothers/single parenting
- child safety
- speech and language development
- good nutrition
- early child development (what to expect at various ages)
- common prescription medications

Child's play is much more than fun and games - it is a vital part of a child's intellectual, social and emotional growth. According to Dr. Marilyn Segal (personal communication, April 7, 1984), a developmental

psychologist at Nova University in Florida, imaginative play helps children make the transition from a sensorimotor type of intelligence - the banging, poking, tearing and exploring characteristics of infants and toddlers to the more abstract thinking of older children and adults. The writer noted two of 18 respondents indicated an interest in the inservice topic - play and young children. The writer also noted a lack of interest in the inservice topic - toy selection. An understanding of child development/early childhood education can enable staff and parents to see the importance of play and age appropriate toys in learning spatial relationships and the boosting of infant causality learnings.

The inservice topics least selected yet of grave importance in a high quality infant/toddler program were:

- screening/record keeping
- play and young children
- constructive room arrangements
- storytelling
- discipline

Causes of the Problem

In 1975, more than five million children in the United States spent at least ten hours a week in family daycare (Frosburg, 1981). Ninety four percent of these children were cared for in unregulated homes. The remaining children were cared for in homes regulated by state and local governments, some of which were sponsored by day care systems of a central administrative agency.

The National Day Care Home study, began in 1976, studied three types of family daycare homes: sponsored, regulated and unregulated. Sponsored homes were affiliated with an administrative agency that provided training, client referral and other support services and generally were funded under Title XX; they also met appropriate government regulations. Regulated homes were usually either licensed by the state following inspection or they were simply registered. Unregulated homes were those where neither an external assessment nor a self-assessment had been conducted prior to operation (Stevens, 1982).

The local licensing agency, the Indiana Department of Public Welfare, has written standards for appropriate physical facilities, health, safety and nutrition procedures which are monitored and enforced. Caregiver and staff training in infant/toddler care and development is not required for facility licensure resulting in a lack of age appropriate caregiver training in most dayhome facilities in the area.

Weikart (1970) suggests the primary role of curriculum is (1) to focus the energy of the teacher on a systematic effort to help the individual child to learn, (2) to provide a rational and integrated base for deciding which activities to include and which to omit and (3) to provide criteria for others to judge program effectiveness so that the teacher may be adequately supervised. The curriculum is for the teacher, not the child and the selection or development of a curriculum is a critical decision. Curriculum that is not age appropriate is therefore unsuccessful. An unsuccessful curriculum is one that permits the teacher to give her energies to areas unrelated

to her interaction with the child within the theoretical framework or fails to give her clear guidelines for using her time in planning and in interacting with the children. An understanding of developmental theory and the ensuing educational implications is of much importance when selecting curriculum and materials.

A survey of the local, county and university affiliated public libraries revealed few early childhood education references, professional journals, periodicals or newsletters are housed in the facilities. The licensing agency does not purchase early childhood materials for the dayhomes nor does the agency provide written information on suggested program format, curriculum or material selection. This lack of guidance and information sources results in continued use of curriculum and materials which are not age appropriate.

Information obtained on the Background/Proposed Topic questionnaire completed by dayhome staff and parents indicated most of the dayhome parents worked or attended school during the daytime hours and were therefore unable to actively participate in daily dayhome activities. The interest indicated for many of the inservice topics revealed the parents' desire to be actively involved in the dayhome program yet through a vehicle accommodating both to the dayhome and lifestyles of the parents.

Related Literature

Within the past decade, increasing numbers of working parents and single parents have made urgent and clear a national need for quality infant/toddler daycare. Infants are the most vulnerable age group of all children who need and receive daycare. Infancy is considered to

to be a crucial period since the brain in most sensitive to modification during the first years (Bloom, 1964). Thus, resources and energies must be pooled to ensure excellence in training daycare personnel who care for infants during the early critical years.

Caregivers in the National Day Care Home study tended to have just under 12 years of education. Although some caregivers had some college education, very few had finished college. This variable appeared to be quite stable across family caregivers in other studies. Hall and Weiner (1977) reported the average education of caregivers as 10.9 and 11.8 years for unlicensed and licensed homes, respectively, and none of the caregivers studied by Colbert and Enos (1978) had a college degree.

Evidence from research on the effects of child care programs and ethical professional practice support the need for qualified, trained and skilled staff in child care programs. The results of surveys and recommendations developed at public forums also indicated that parents and others believe that child development/early childhood education training is an important factor in the provision of quality child care.

One of the important findings of the National Day Care Home study was the value of training family daycare workers. Training and sponsorship were positively related to caregiver behavior. The study found that teaching, play participation, language/information activities, fine motor activities, helping and music/dramatic play activities were behaviors enhanced by more training. Training and sponsorship were also associated with more stimulating caregiver-child interaction in ways which were critical for children's development (Stevens, 1982).

Ruopp et. al. (1979) reported that the primary predictor of the effectiveness or quality of child care programs has been found to be caregiver's child development/child care focused training. This training provides a constant intellectual challenge: the ability to dance the developmental ladder. In order to dance the developmental ladder with more ease and accuracy, it is helpful to understand the tasks and games of each stage of infancy and the developmental needs of babies.

Intellectual development, according to Piaget (1959), occurs as individuals construct reality through interactions with persons and materials. The environment that can maximize intellective development must provide sufficiently varied materials at levels appropriate to the developmental stages of the babies served. These explorations within a safe environment will encourage the growth of cognitive understanding about how the physical and social worlds work (Honig and Caldwell, 1981).

Administrators of child care programs for children need skills developed from the study of children (Hewes and Hartman, 1979). They must rely on current research and practice in the field of child development/early childhood education to assist them in guiding staff to plan the daily activities in which children will engage; to select appropriate learning materials and settings for children; to provide a safe, healthy and intellectually stimulating environment for children; and to offer nutritious food for a variety of ages and tastes.

Staff members of child care programs must also be able to apply research and theory in planning curriculum activities that promote the

healthy growth and development of the diversity of children in their care (Kamii, 1981).

Babies need floor freedom and digestible learning experiences. Piaget (1952) provides us with insights about the evolving understandings of babies with regard to the permanence of objects, the ins and outs and ups and downs of space, the coordination of incoming information by different senses and the separation of actions which are means from those which are goals. Helping babies to learn to increase their repertoire of actions, the understandings of how toys work, how people respond and what the rules of the world are like requires patient and persistent attempts at matchmaking on the part of the caregiver (Honig, 1979). Understanding Piagetian levels of infant development helps a caregiver make appropriate choices of learning activities. Perceptive matchmaking by the caregiver permits the baby to explore, discover and deal with the new while secure in using already acquired learning (Honig, 1978).

Parents want to learn more about childhood. How parents embark on the responsibility of their child's upbringing in a manner not harmful to the child depends to a great extent upon their personalities and emotional responses together with their knowledge of child development (Kelly, 1981).

Most of the evidence from long-term intervention research with infants and toddlers points to the crucial importance of involving parents as partners with caregivers in providing for what Caldwell (1967) has called the optimal learning environment. Parents are baby's first and most important teachers. Yet, they may need support

in learning developmentally positive ways in which to interact and to enhance the learning careers of their babies (Honig and Caldwell, 1981). It therefore becomes the responsibility of the caregiver to find ways to enhance the coordination of family and staff efforts to provide for optimal development.

Personal contact with parents is easily established in early childhood programs because parents are usually in daily contact with the staff. One method used to impart information and help to parents is through small discussion groups. Averbach (1968) reports that parent discussion groups help parents to understand and accept their own feelings and concerns and provides a sense of fellowship with others going through the same experiences. Dinkmeyer (1968) maintained that teachers, within the context of the school program, can have their most profound effect upon children through parent discussion groups. Such parent discussion groups have often been scheduled during school hours for the convenience of the staff with limited attendance by parents. If the primary purpose of the discussion group is to involve parents in the educational process and to assist them to better understand their children and facilitate children's growth, then caregivers will want to attempt to adapt to the needs of families with varying lifestyles and work schedules (Kelly, 1981).

Haegert and Serbin (1983) noted parent education focusing on observing and recognizing children's developmental progressions was effective motivation for parents to fully participate in the implementation of home training programs for their delayed infants.

Scovern (1980) suggests that the critical components of parent involvement, education or counseling may be the mere presentation of relevant information.

Group discussions may need to be supplemented with additional reading and more personal literature or substituted on some occasions with individual conferences designed to achieve the same objective as the group sessions (Kelly, 1981).

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Goals and Expectations

The goal of this practicum was to design and implement an inservice program for the dayhome caregiver and parent in infant/toddler development and care. An increase in the ability to select and use age appropriate curriculum and materials was also expected as the administrator of the program, staff and parents learned to apply research and theory in the use of developmental assessment for planning curriculum activities that promote growth and development. Finally, an increase in the amount of parent involvement time was expected as parents were made aware of the important role they play as baby's first and most important teacher.

Behavior Expected

The following objectives were projected for the dayhome administrator and staff:

1. Assess dayhome children for initial developmental levels.
   Assessment: Infant Stimulation Curriculum Assessment Tool
2. Following assessment, observe and identify developmental level of children between the ages of 3 and 36 months with 80% accuracy.
   Assessment: Assessment Summary Profile (Appendix H)
3. Initiate use of age appropriate curriculum and materials for each child based on previously determined developmental levels.

Assessment: Infant Stimulation Curriculum
Right Toys at the Right Age Chart

4. Write two lesson plans which include preassessment, overall goal, activity, materials needed and evaluation for the designated population.

   Assessment: Copies of lesson plans prior to and following practicum implementation period. (Appendix I)

5. Disseminate information concerning specific characteristics of infant/toddler developmental stages based on Piagetian and Ericksonian theory and appropriate tips and activities for home use to parents of the target population.

   Assessment: Copies of weekly newsletter (Appendix J)
   Parent newsletter survey (Appendix K)

The following objectives were projected for the dayhome administrator, staff and parents:

6. Select or design three activities, with appropriate materials, that correspond with each of the sensorimotor stages as defined by Jean Piaget.

   Assessment: Copies of activities taken from curriculum

7. Demonstrate an understanding of Ericksonian stages of development using role playing episodes followed by discussion for appropriateness of caregiver response.

   Assessment: Pre- and post-role playing survey (Appendix L)

8. Document completion of three training objectives and suggest goals for ongoing professional growth.

Assessment: Copies of inservice session evaluations (Appendix M)

Dayhome Administrator/staff pre- and post-evaluations (Appendix N)

Objectives are directly related to the problems presented in Chapter II.

PROBLEMS	OBJECTIVES
1. Lack of knowledge in child development theory/early childhood education area on the infant/toddler level.	I, II, III, IV VII, VIII
. Inappropriate curriculum/materials	III, IV, VI
3. Lack of parent involvement	V, VI, VII, VIII

Mechanism for Recording Unexpected Events

Additional information was documented in a set of logs kept by the writer and all practicum participants. Participants were asked to make an entry in the formal log at the beginning and end of each inservice session. Parents and dayhome staff were asked to make response entries in the informal logs at home and/or in the dayhome as suggested activities and materials were tried to document unexpected events and outcomes that occurred during the practicum implementation period.

Measurement of Objectives

The Infant Stimulation Curriculum Assessment Tool was developed by Pat Storm and Gail Meddaugh in 1978 at the Ohio State University Nisonger Center. The assessment tool was devised to determine a

child's stage of development in each of the six areas of the curriculum: coordination, locomotion, cognition, receptive language, expressive language and socialization. The assessment tool should be used in conjunction with the curriculum. The writer added three additional developmental areas to the assessment tool: eating, dressing and toileting. The additional areas were adapted from the Functional Profile, copyrighted in 1974 by the 0-3 Replication Project of the Peoria Association for Retarded Citizens & United Cerebral Palsy.

The Infant Stimulation Curriculum, developed at the Nisonger Center for Mental Retardation and Developmental Disabilities of Ohio State University, was revised in May, 1976. The curriculum lists and describes the things most children do from birth to three years of age. The curriculum also describes activities that parents and teachers can use to help children between these ages grow and learn.

As a child's physical, intellectual and social skills grow so does the need for toys that match the growing abilities and changing interests of that child. The Right Toys at the Right Age Chart is a guide developed by Joanne Oppenheim, associate editor of the Publications Department at the Bank Street College of Education, to help parents and teachers select age appropriate toys.

Upon completion of administering the assessment tool, developmental levels were plotted, in graph style, using the Assessment Summary Profile.

The dayhome staff and parents were asked to give a response rating of (1) low to (6) high on the parent newsletter surveys and the inservice session evaluations. Additional information was provided in the suggestions and/or comments section of each instrument.

The role playing surveys and dayhome administrator/staff evaluation tool were used as pre- and post-evaluation tools. This involved an initial response to a situation or performance followed by information gathering and guided observation, a re-evaluation of the situation through discussion and a new response based on newly established competencies.

CHAPTER IV

SOLUTION STRATEGY

Discussion and Evaluation of Possible Solution

Ongoing staff training is an essential guarantor of increasingly high quality caregiving (Honig and Lally, 1981). Staff training needs emphasis in two directions:

1. Information should be provided about growth and development of infants and toddlers. Topics should include learning tasks and gains of the sensorimotor and early preoperational periods and how to foster early prosocial behaviors. Inservice sessions should also be presented on ways to ensure a positive balance in the development of basic trust, autonomy and initiative.
2. Methods to improve communication skills should be initiated. How can caregivers better communicate with children? With parents? With other staff? Communication skill training permits adults more effectively to validate the good selves and personhood of very young children (Honig, 1981).

Providing resources - written, human (consultant) and audio visual - during training is one method for delivery of services (Honig and Lally, 1981). To be useful, written material must be readily available, read, discussed and relevant to the dayhome staff's daily experiences. There are few infant/toddler development and education text, professional journals, newsletters or early childhood organization affiliate groups

in the Gary, Indiana area. It must also be remembered that written resources are helpful but not infallible and do not work in every situation with every baby.

Use of consultants is a training method often mentioned. In the dayhome setting, money is usually in short supply. Use of consultants for area wide conferences is a possibility, but on an individual basis dayhomes usually cannot afford consultative services.

Audio visual monitoring is an effective training method but can be done only if the equipment needed is available. Modular systems, communication skills and body language can all be easily evaluated and monitored for positive change using this method. The equipment needed for audio visual monitoring could not be located locally on a consistent basis therefore the possibility of using this training method was abandoned.

Professional training of dayhome administrators and staff in infant/toddler development and education is another training method suggested often. The training would therefore be more in depth with provision for behavior modeling and possible hands on experience through internships. At present, local colleges and universities do not offer coursework in infant/toddler development and education.

Local, state and national level workshops focusing on how parents and teachers can best facilitate high quality infant/toddler development and education are sponsored yearly and can be used as a dayhome training method. Again, the short supply of money becomes an issue. In addition to not being able to afford the fees charged to attend the workshops, many dayhome administrators and staff are unaware the workshops and

conferences exist. They are also unaware of the abundance of ideas, free materials and resources these conferences make available to conference attendees. Until there is a joint thrust to improve the quality of dayhome services in the Gary, Indiana area, none of the training methods discussed will be feasible.

Description of and Justification for Solution Selected

The NAEYC position statement on staff qualifications related to quality child care, adopted on November 4, 1981, states that in order to be effective in aiding and enhancing child development, adults must have sound theoretical and practical knowledge and the skills to help children grow into responsible adults. This knowledge base and its concomitant skills can be obtained through inservice sessions.

The context of training is crucial to the success in awakening self awareness and motivating learning and attitude change in participants. The learning climate should foster mutual openness and devotion to the goal of becoming quality caregivers (Honig, 1983).

The solution strategy selected for implementation was a series of four, in-depth, inservice sessions. The inservice series was designed to increase the dayhome administrator, staff and parents awareness of infant/toddler development, education and care. The four major topic areas presented in the inservice sessions were:

1. Infant/Toddler Development
2. Assessment and Age Appropriate Curriculum/Material Selection
3. Health, Nutrition and the Importance of Play
4. Parent/Caregiver Partnerships

Each inservice session was limited to three hours. The last half hour of each session was set aside for questions, comments, supplemental reading and independent study of situations generated from preceding session topics. The inservice sessions were multi-media presentations incorporating films, filmstrips, child development games, handouts and material displays.

Efforts were made to stimulate caregivers to think of ways in which parent/caregiver communication could be facilitated at the face-to-face, the written and the telephone level of communication. Parents of children enrolled in participating dayhomes were invited to attend each inservice session. In addition, each inservice session was supplemented with three follow-up newsletters, TidBits for Parents, designed to provide parents with child development information and home activities presented at each inservice session.

The overall goal of fostering mutual openess and devotion to becoming quality caregivers was continually stressed in addition to the individual goals set for each inservice session. Each participant was asked to keep two logs, an informal and formal log. In the formal log, which was used during each inservice session, the participant recorded information that had been discussed, thought about, or puzzling during the training. The informal log was used in the home/dayhome setting by the participants to vent the pleasures, pains and personal discoveries of the formal information becoming meaningful during their daily routines.

The inservice format selected for implementation enabled the writer to consistently incorporate the following training techniques

suggested by Honig (1983):

1. Model desirable behaviors caregivers should exhibit with children.
2. Make sure caregivers see that their techniques and activities depend on information about infant development, on understanding the hierarchial nature of early learnings that build upon other learning and on emotional security.
3. Provide resources - written, human and audio visual - during training.
4. Explore with caregivers their feelings; discuss value clarification.
5. Ask caregivers to keep diary records.
6. Provide hands on experience where possible.
7. Emphasize ways in which curricular goals can be embedded in daily routines.
8. Praise each participant as he grows and learns.

A well planned and executed inservice training program can improve job satisfaction and the quality of performance, thereby increasing the quality of service to young children and their families (Hatfield, 1981).

Report of Action Taken

In early June, 1984, a copy of the practicum outline was submitted and discussed with the Director of the Lake County Department of Public Welfare. The DPW is the local licensing agency for family dayhomes.

By mid September, the practicum project had been approved by the Lake County Welfare Board. The practicum format was then discussed in

detail with the licensing supervisor of the DPW. The licensing supervisor made available a listing of the names and addresses of all licensed family dayhomes in the Lake County area.

In early October, five family dayhomes, licensed to care for from 6 to 10 children, were randomly selected as possible practicum participants. Each of the five dayhome administrators was contacted by letter (Appendix A) and invited to participate in the practicum.

By mid October, Wee Folks Nursery had responded to the letter of invitation. An onsite observation sheet (Appendix B) and a needs [illegible]ent/interview (Appendix C) were completed. Wee Folks Nursery was then accepted as the practicum site. A site acceptance letter (Appendix D) was forwarded to Wee Folks Nursery. Multiple copies of the Background/Proposed Topic questionnaire (Appendix E) were also forwarded for distribution to the dayhome staff and all parents. The questionnaire was designed to gather information on family composition and background of the dayhome clientele and to identify training needs and areas of interest.

Since the inservice sesssions were designed as multi-media presentations incorporating films, filmstrips, child development games, text, toys, professional journals, handouts and material displays with no funds available to make purchases for the inservice sessions, the writer kept costs to herself to a minimum by mailing a request for information and/or materials letter (Appendix F) to the following sources:

1. Boston Center for Blind Children
   147 South Huntington Avenue
   Boston, Massachusetts 02115

Requested complimentary copy of - Developmental Checklist

2. Chapel Hill Training Outreach Project
   Eric Document Reproduction Service
   P.O. Box 190
   Arlington, Virginia 22210 (ED 097968)

   Requested complimentary copy of - A Planning Guide to the Preschool Curriculum: The Child, The Process, The Day

3. Obtained a copy of the Neonatal Perception Inventory for detecting at risk infants from the local university library. (Broussard and Douglas, 1974)

4. Model Preschool Center for Handicapped Children
   Experimental Education Unit (W5-10)
   Child Development and Mental Retardation Center
   University of Washington
   Seattle, Washington 98195

   Requested complimentary copy of - Preschool Profile and Developmental Pinpoints

5. New Haven Preschool Program for Handicapped Children
   400 Canner Street
   New Haven, Connecticut

   Requested complimentary copy of - Developmental Screen/ Infant Level and Developmental Screen/Preschool Level

6. The Schaumburg Early Education Center
   SEEC Communications
   804 W. Bode Road
   Schaumburg, Illinois 60193

   Requested complimentary copy of - Developmental Milestones Miniwheel, Maxiwheel and Parent Brochure

7. Early Childhood Learning Center
   Early Childhood Division
   P.O. Box 10716
   El Paso, Texas

   Requested complimentary copy of - Developmental Screening Scale

8. Southeast Mental Health and Retardation Center
   700 First Avenue South
   Fargo, North Dakota 58102

Requested complimentary copy of - Infant Evaluation Scale

9. Project Memphis
Kendall/Hunt Publishing Co.
2460 Keiper Boulevard
Dubuque, Iowa 52001

Requested complimentary copy of - Instruments for Individualized Program Planning and Evaluation

10. Nisonger Center
Developmentally Delayed Infant Education Project
Ohio State University
1580 Cannon Drive
Columbus, Ohio 43210

Requested complimentary copy of - Stimulation for Infants and Toddlers

11. Chapel Hill Training Outreach Project
Lincoln Center
Merrit Mill Road
Chapel Hill, North Carolina 27514

Requested complimentary copy of - Infant LAP

12. Alaska Head Start Special Services Project
Easter Seal Society
726 E. Street
Anchorage, Alaska 99501

Requested complimentary copy of - Homemade Developmental Toys and Activities

13. National Institute of Mental Health
Division of Scientific and Public Information
U.S. Department of Health and Human Services
Public Health Service
5600 Fisher Lane
Rockville, Maryland 20857

Requested complimentary copy of - Plain Talk Series Handouts (also available in local grocery stores)

14. Ross Laboratories
Division of Abbot Laboratories
Columbus, Ohio 43216

Requested complimentary copy of - Babies Need Iron Chart

15. Gerber Products Company
Medical Marketing Series
445 State Street
Fremont, Michigan 49412

Requested complimentary copies of the following:

- Pediatric Basic Series (past issues)
- Pediatric Basic Instructional Poster Series

  a. Patterns in Infant Nutrition - Breast Feeding
  b. Patterns in Nutrition
  c. Patterns of Development
  d. Patterns of Growth
  e. Patterns of Plant Safety
  f. Patterns of Child Safety
  g. Patterns of Auto Safety

- A Guide to Starting Foods for Infants
- Nutrient Values - Gerber Baby Foods
- Feeding Baby Booklet
- Baby's Book
- Expectant Mothers Guide
- So You've Decided to Breast Feed Your Baby
- The Incredible, Insatiable Sucking Desire Booklet
- A Handbook of Child Safety
- How to Protect Your Child in Your Care

16. Dairy Nutrition Council, Inc.
Six North Michigan Avenue
Suite 807
Chicago, Illinois 60602

Requested any public information literature available

17. Society for Nutrition Education
1736 Franklin Street
Oakland, California 94612

Requested any public information/resources literature available.

18. National Poison Center Network
Children's Hospital of Pittsburg
Pittsburg, Pennsylvania

Requested multiple copies of brochure - Common Poisonous Plants

19. The Ontario Institute for Studies in Education
252 Bloor Street West
Toronto, Canada M5S1V6

Requested copy of - Guides to Early Day Care and Teaching
W. Fowler (1978)

20. Distribution Coordinator
Media Services Division 151-X
Texas Department of Human Resources
P.O. Box 2960
Austin, Texas 78769

Requested copy of - Child Development Program Materials
Manual Spring 1983

21. Southern Association on Children Under Six
Box 5403, Brady Station
Little Rock, Arkansas 72215

Requested copy of the following:

- SACUS Brochure
- Publications List
- Dimensions Journal (complimentary copy)
- Dimensions Index

22. Infant Mental Health Project
Gary Community Mental Health Center, Inc.
1100 West Sixth Avenue
Gary, Indiana 46402

Requested copies of any public information/services
available

The sources listed were compiled during completion of a thorough literature review.

By early November, the Background/Proposed Topic questionnaire had been completed by the staff and parents of Wee Folks Nursery. The dayhome administrator collected and forwarded the questionnaires to the writer. A data analysis was conducted by the writer. The data compiled enabled the writer to select the topics to be covered in the inservice sessions, compile information and complete the writing of the practicum proposal.

In January, 1985, the practicum proposal was submitted and approved for implementation. Tentative arrangements were made for acquisition of an inservice session site and dates.

By late January, a local community center had agreed to provide a conference room, seating and audio visual equipment free of charge to the writer. Inservice session dates and times were finalized and placed on the community center calendar. The writer designed a publicity brochure with registration form (Appendix G) and forwarded multiple copies to Wee Folks Nursery for dissemination to staff and parents. It should be noted that it was at this point that other dayhomes, initially invited to participate, became interested and requested registration forms. The writer agreed to accept any interested, licensed dayhome administrator, staff and parents as inservice session participants with the only requirement being a two week pre-registration in writing. Registration forms were made available upon request.

The initial Co-Evaluatin Form (Appendix N) was completed by Wee Folks Nursery dayhome administrator and staff. The evaluation tool, administered at the beginning and end of the practicum, was used as a pre- and post-measure of overall competence. The dayhome administrator evaluated herself and each staff member using the Co-Evaluation Form. Each staff caregiver then evaluated themselves using the same tool.

The writer compiled a training booklet for Session I along with charts, diagrams, references and handouts. Two filmstrips were acquired for presentation - Infant as a Person and Toddlers.

In mid February, Session I - Infant/Toddler Development was held at the community center. Session I attracted 12 participants who represented six licensed family dayhomes, the local licensing agency, the Gary Community Mental Health Center and parents. The inservice session proceeded according to the Session I agenda (Appendix O), with the writer and the Assistant Supervisor of licensing welcoming the dayhome administrators, staffs and parents present. Each participant was asked to stand and introduce themselves, giving their name, the dayhome name and location, the number of children they were licensed to care for and the age range served. The introductions served as a social warm-up, allowing each participant the opportunity to meet another participant. The writer then explained that the inservice sessions were designed to help the dayhome administrators, their staffs and parents better understand infant/toddler development, care and education and by becoming involved in the training sessions, the participants would better enjoy the following benefits:

- They would find themselves constantly fascinated by children's behavior
- They would see the long-term importance of the work they are doing
- They would have a framework within which to place individual differences and delays in development
- They would become sensitive to possible problems in development
- They would be able to chart specific directions in their programs for a specific child
- They would learn to plan the details of their program in light of solid knowledge about children

The Session I Pretest (Appendix P) was then administered amid many exaggerated moans. The writer noted the thought and concentration given the questions and the participants request for more time to complete answers.

Each participant was given a black 3-hole binder containing notebook paper and four dividers. The writer explained that the binders could be taken home but were to be brought to each inservice session. Participants were told training booklets would be replaced if necessary, binders would not be replaced. Participants were also given two logs, the informal log and the formal log. They were instructed on how each was to be used. Notations were then made in the formal logs. Session I training booklets were disseminated. The writer instructed the participants to place each training booklet received in the binder, therefore building a reference they could refer to in the future. The Session I training booklet contained information on the following topics:

- The Neonate
- Early Infancy
- Learning Theories

  Arnold Gesell/Maturational Theory
  B.F. Skinner/Behavioral Theory
  Erik Erikson/Psychoanalytic Theory
  Jean Piaget/Cognitive Theory

- Areas of Development
- Development of the Infant
- Development of the Toddler
- Activities for the Participant

- Study Questions I/Independent Reading Article
- Session I Evaluation

Resources and references on infant/toddler development were placed on a display table near the rear of the room and participants were instructed to peruse the material during the break. Reference sheets, which listed each reference displayed and ordering information, were also available on the display table.

The highlight of Session I was the gaming activity designed to teach the participants the four learning theories. The writer presented the learning theories by using a key word for each theory and then reinforcing the understanding of each theory with a game - Theory Trivia. A key words chart was displayed as sets of five statements were read to the participants. Participants had to determine which learning theory each statement reflected. The participants recorded their responses on a Theory Trivia Response Sheet (Appendix Q). After each set of statements was read, the writer would then stop, check responses with the group and reward each participant who had four or five correct responses. Participants selected NAEYC posters as rewards. The game was designed with only three sets of statements. At the end of the third set, participants requested an additional game. One additional game set was granted.

Following the presentation of information on areas of development with specific emphasis on development of the infant and toddler, the writer slowly guided the Session I participants through the completion of a Developmental Chart (Appendix R) using a narrated case study of

an infant. Participants were instructed to listen carefully for specific information on the infant's overall development and behavior and to make notations on the Developmental Chart as the case study was read. Upon completion of the reading of the case study, participants were asked to read notations they had made in each block of the Developmental Chart. Based on their notations, the participants were then asked to decide as a group which area of development appeared most delayed in the infant described in the case study. This group activity served as an excellent culminating activity, allowing the participants to discuss and use information presented. The Session I posttest, which followed the showing of two filmstrips, was completed quickly and with much enthusiasm.

In mid February, following Session I, Wee Folks Nursery dayhome administrator, under the guidance of the writer, completed the administration of the Infant Stimulation Curriculum Assessment Tool on two toddlers in her program. Using the assessment tool, the writer and dayhome administrator determined the developmental level in each developmental area for each toddler and plotted the developmental levels on an individual Assessment Summary Profile per toddler.

By late February, the writer had completed the writing of the newsletters, TidBits for Parents, Issue I, volumes 1, 2, and 3 (Appendix J). Multiple copies of the newsletters were disseminated to participating dayhomes. The dayhomes were instructed to disseminate one volume per week, in sequence, and to collect the newsletter surveys weekly. Parents had to return the newsletter survey for each newsletter before receiving the next volume.

By early March, an abundance of complimentary copies of materials requested from previously listed sources had been received. All materials were catalogued by the writer for use and distribution at upcoming inservice sessions. The writer compiled the Session II training booklet with accompanying charts, handouts, games and a large set of materials for display. A publicity flyer for Session II (Appendix S) was designed, duplicated and disseminated to participating dayhomes. The writer then followed up with telephone calls to all Session I participants, reminding them of the date, time and meeting place for Session II and an invitation to each to "bring a friend".

In mid March, Session II - Assessment and Age Appropriate Curriculum/ Material Selection was held at the community center. The community center conference room was decorated with NAEYC posters, balloons and three material display tables. There was a table of resources for each part of the session title - assessment, curriculum and materials. The writer placed the impressive display at the front of the room to generate continued interest, enthusiasm and constant curiosity. Session II attracted sixteen participants who represented nine licensed family dayhomes, the Gary Community Mental Health Center and dayhome parents. The inservice session proceeded according to the Session II agenda (Appendix O), with the writer welcoming the group. The writer asked the new participants to stand and introduce themselves and each participant was given a name tag. The Session II Pretest (Appendix P) was then administered to the participants. The writer noted that Session I participants readily accepted and completed the Session II Pretest. Upon completion of the pretest, the formal logs were

disseminated and participants were instructed to enter notations (questions on Session I material, feelings, expectations, suggestions or comments). Session I participants explained to new participants how the informal and formal logs were to be used. The Session II training booklets were disseminated and placed into the second section of the black binders. The training booklet contained information on the following topics:

- Areas of Development

  Social-Emotional
  Perceptual-Motor
  Cognitive
  Language

- Developmental Checklists (0-5 years)
- Readiness Checklist for Parents
- Group Activities for the Participants
- Practice Goal Writing Sheets
- Sample Lesson Plans
- Activity Checklist Techniques
- Sample Children's Work for Group Analysis
- Sample Infant/Toddler Curriculum
- Study Questions II/Independent Reading Article

Following the presentation of information on the areas of development and the appropriate use of developmental checklists, the participants were divided into three groups. Each group was given a problem situation and three Role Playing Survey Sheets (Appendix L). Each group was instructed to "trouble shoot" their problem situation and decide how to best handle the children depicted. Participants were

reminded to keep in mind the child's age, developmental level and the setting. Once the group members agreed on how to best handle the problem situation, they were to role play the situation and solution strategy before the entire group. Each group was to record their solution on one of the Role Playing Survey Sheets prior to role playing the situation and solution before the entire group. Following the role playing, the audience groups then discussed how the presenting group handled the problem situation and decided if they agreed with the solution or would handle it differently. The audience groups were instructed to record their discussion points and their solution on one Role Playing Survey Sheet per problem situation. Audience groups, through a spokesperson, then presented their discussion points to the entire group and explained why they did or did not agree with the solution presented. This activity served to generate much discussion among the participants and gave them an opportunity to think about the information and material they received in Sessions I and II. The information on areas of development and levels of development dominated the discussion. Frequent references were made with regard to individual differences.

The highlight of Session II was definitely the break period at which time the participants could peruse the large materials display. The writer made available reference sheets at each display table which listed ordering information on each reference displayed. Reference sheets gave participants the opportunity to easily note references of interest. In addition, each display table contained one complimentary copy of a reference displayed. Each participant therefore obtained

one complimentary copy of an infant/toddler assessment tool, an infant/toddler curriculum and an infant/toddler age appropriate toy.

The enthusiasm generated by the materials display served as an excellent lead in for the group game activity which began the second segment of Session II. All participants played three rounds of Developmental Bingo (Appendix T), a game developed by the writer to teach and reinforce awareness of approximate ages at which most infants and toddlers master general developmental skills. Participants were instructed to listen to each skill read and using only the ages listed on the Developmental Bingo Grid (Appendix U), select and write down the age at which a child should have mastered the skill read. Three practice skills were read with the participants, as a group, guessing at the developmental ages. At the conclusion of the three sets of Developmental Bingo, the participant with the most developmental ages correctly listed per game was awarded a Fisher-Price infant/toddler puzzle from the material display table.

Participants eagerly listened and participated in the remaining segments of Session II. A new found confidence was evident as the participants quickly and competently completed the Session II Posttest (Appendix P).

In late March, the writer forwarded a complimentary copy of the Infant Stimulation Curriculum to Wee Folks Nursery. The dayhome administrator was instructed to read through the curriculum to become familiar with the format and what materials she would need to gather. After familiarizing herself with the curriculum, the dayhome administrator was instructed to select one developmental area per toddler to concentrate

instruction on. Once the developmental area was selected, the dayhome administrator was to then pull three instructional activities from the curriculum card file. The writer and dayhome administrator then met to discuss the following:

- Basis for selecting the developmental area
- Basis for selecting the instructional activities
- Suggested sequence of activities
- Suggested supplementary/home activities

A sample lesson plan was then completed by the dayhome administrator. One week after initiating use of the curriculum, the dayhome administrator readministered the assessment tool to each toddler. Developmental levels were determined and plotted, using a different color of ink on the same Assessment Summary Profile used for Assessment I.

By early April, the writer had completed the writing of the newsletters, TidBits for Parents, Issue II, volumes 1, 2 and 3 (Appendix J). Multiple copies of the newsletters were disseminated to participating dayhomes. The dayhomes were again instructed to disseminate one volume a week, in sequence, and to collect the newsletter surveys weekly. Parents were reminded that they had to return the newsletter survey for each newsletter before receiving the next volume. Dayhome administrators requested additional copies of the newsletter survey sheets to be kept at the dayhomes for those parents who read the newsletters but could not remember to return the surveys. Having additional newsletter survey sheets on hand expedited distribution of the newsletters because it enabled the dayhome administrator to have parents complete surveys when they came to pick up their children.

The writer made periodic visits to Wee Folks Nursery to monitor lesson plans and use of the Infant Stimulation Curriculum.

The writer compiled the Session III training booklet with accompanying charts and handouts. A publicity flyer for Session III (Appendix S) was designed, duplicated and disseminated to participating dayhomes. Telephone follow-up was not necessary at this point.

The community center operates an onsite daycare program for two, three and four year old children. The daycare program had recently completed a unit on nutrition. The room had been decorated with posters of foods and the basic four good groups by daycare staff. The writer requested and was granted permission to hold Session III in the daycare room.

In mid April, Session III - Health, Nutrition and the Importance of Play was held in the daycare room of the community center. Session III, which followed the Easter holiday week, attracted nine participants who represented five licensed family dayhomes, the Gary Community Mental Health Center and dayhome parents. Several of the previous participants were unable to attend due to the holiday yet, many of them telephoned the writer requesting copies of the Session III training booklet and follow-up newsletters.

The inservice session proceeded according to the Session III agenda (Appendix O). The Session III Pretest was administered to the participants. Upon completion of the pretest, the formal logs were disseminated and participants were instructed to enter notations. The Session III training booklets were disseminated and placed into the third section of the black binders. The Session III training

booklet contained information on the following topics:

- Session II review
- Health Self Assessment for the Caregiver
- Communicable Diseases/Immunization Charts
- Common Contagious Diseases
- Designing and Using Parent-to-Staff Communications
- Child Care and Disease: Recommendations for Practice
- Food for Your Young Child (chart)
- Sample Nutrition Record
- Guide to Good Eating
- Notes on Developmental Patterns in Play
- Study Questions III/Independent Reading Article

The highlight of Session III was the break period at which time participants could sample and discuss the nutritious meals and snacks that had been set up on a display table. The writer displayed several inexpensive meals that would be appropriate for lunch time and nutritious snacks in child-sized servings. The writer and participants discussed the importance of linking health and nutrition information in addition to the reasoning behind serving child-sized servings. A participant pointed out the importance of offering a variety of foods to children.

Discussing the problems that arise in every day play situations gave participants an opportunity to understand how important a child's overall development is to his ability to play. Participants were reminded that a child's overall development is most easily observed during episodes of play.

Participants were then asked to write down a simple meal (lunch) and/or snack they had used in their dayhome. The meal and/or snack had to be a favorite of the dayhome children. Participants then shared their recipes with each other.

Following the completion of the Sesssion III Posttest (Appendix P), participants requested additional copies of all health and nutrition charts included in the training booklet for dissemination to parents. The writer explained that participants were free to duplicate and disseminate any material included in the training booklets.

By late April, the writer had completed the writing of the newsletters, TidBits for Parents, Issue III, volumes 1, 2 and 3 (Appendix J). Multiple copies of the newsletters were disseminated to participating dayhomes with reminder notices regarding the dissemination procedure to follow.

In early May, the writer visited Wee Folks Nursery to again monitor the use of the Infant Stimulation Curriculum, to check the age appropriateness of selected tasks and to evaluate the thoroughness and clarity of lesson plans. The dayhome administrator readministered the assessment tool, determined the developmental levels and plotted the information, using a third color of ink, on the Assessment Summary Profile of each toddler. Conferences were scheduled with parents to discuss the information gathered.

The writer compiled the Session IV training booklet with accompanying charts, handouts, games and materials for display. A publicity flyer for Session IV (Appendix S) was designed, duplicated

and disseminated to participating dayhomes. It should be noted that attendance had to be limited to 20 participants at this time due to the publicity generated through word of mouth of active participants Sharing of information, charts and handouts contained in the inservice session training booklets in addition to the sample curriculum, assessment tool and the give away of toys, games and NAEYC posters, during the monthly Title XX Nutrition meetings caused the writer to be deluged with calls for possible registration for the last session. Duplication cost for the training booklets and Certificates of Attendance, to be distributed at the end of Session IV, plus limited space limited the number of participants the writer could register. The writer therefore agreed to register only parents of dayhomes that had participated in two previous inservice sessions. The number of participants was limited to 20.

In mid May, Session IV - Parent/Caregiver Partnerships was held at the community center. The conference room had been decorated with balloons and gross motor toys donated by a local toy store. Participants, awed by the number of upcoming give-a-ways in the room, chatted loudly among themselves as they examined the displays. The large number of people in the room prompted several participants to approach the writer and ask for their training booklets.

Session IV attracted much attention resulting in all 20 registration slots being filled. The 20 participants represented nine licensed family dayhomes, the Gary Community Mental Health Center and 10 parents. The inservice session proceeded according to the Session IV agenda

(Appendix O). The Session IV Pretest (Appendix P) was administered and notations were made in the formal logs. Active participants explained the purpose of the formal log to new participants. The Session IV training booklets were disseminated and placed into the fourth section of the black binders. Session IV training booklets contained information on the following topics:

- Structuring Your Business for Success
- Know Your Children/Sources of Information
- Know Your Clientele/Sources of Information
- Know Your Business/How to Information
- Sample forms, schedules, contracts
- Promoting Family Day Care
- Sessions Reviews Through Gaming

  Theory Trivia
  Developmental Bingo
  Problem Solving

- Study Questions IV/Independent Reading Article

The participants, caregivers and parents, were particularly interested in the information presented on insurance, taxes, parent/caregiver contracts and other forms needed in record keeping.

Review of particularly important information was accomplished by repeating previous gaming activities. Participants eagerly played two rounds of Theory Trivia, Developmental Bingo and Problem Solving. As the games were played, parents rallied behind their respective dayhomes and cheered as game participant winners were awarded the displayed gross motor toys for outstanding performance.

Following the rousing review, the Session IV Posttest (Appendix P) was administered. Participants quickly and confidently completed the posttest. A discussion of the study questions and independent reading articles for each session culminated Session IV.

The highlight of Session IV was the awarding of the Certificates of Attendance (Appendix V). The certificates were awarded to participants who had accumulated nine or more hours of training in the Infant/Toddler Inservice Program.

In late May, the final Co-Evaluation Form was completed by Wee Folks Nursery dayhome administrator and staff. This data was forwarded to the writer for analysis.

The writer completed the writing of the newsletters, TidBits for Parents, Issue IV, volumes 1, 2 and 3 (Appendix J) and forwarded multiple copies to participating dayhomes. Copies of all 12 newsletters were also forwarded to the supervisor and assistant supervisor of family dayhome licensing for the Lake County Department of Public Welfare. Included in each newsletter packet was a note thanking each participant for their contribution to this practicum - a true problem solving process.

CHAPTER V

RESULTS, CONCLUSIONS, AND RECOMMENDATIONS

Presentation and Analysis of Results

The major goal of this practicum was to design and implement an inservice program for the dayhome administrator, staff and parent in infant/toddler development and care. An increase in the ability to select and use age appropriate curriculum and materials was also expected as the administrator of the program, staff and parents learned to apply research and theory in the use of developmental assessment for planning curriculum activities that promote growth and development. Finally, an increase in the amount of parent involvement time was expected as parents were made aware of the important role they play as baby's first and most important teacher. Eight objectives were established to accomplish these goals:

Objective 1. Assess dayhome children for initial developmental levels.

This objective was met. Three assessments were completed on two toddlers during the practicum implementation period. The Infant Stimulation Curriculum Assessment Tool was the assessment instrument used. Assessment I, conducted at the beginning of the practicum, was completed by the writer as Wee Folks Nursery dayhome administrator and staff observed the process. The writer observed

each toddler during structured activities and periods of play. Assessment II, conducted midway through the practicum, was completed by Wee Folks dayhome administrator, under the guidance of the writer. The dayhome administrator completed Assessment III, conducted at the end of the practicum, without assistance.

Objective 2. Following assessment, observe and identify developmental level of children between the ages of 3 and 36 months with 80% accuracy.

This objective was also successfully met. Following the completion of Assessment I, the writer demonstrated how developmental levels for each developmental area are determined based on the data obtained during the assessment and how to plot the developmental levels on an Assessment Summary Profile. Midway through the practicum, Wee Folks Nursery dayhome administrator determined developmental levels for Assessment II and plotted an Assessment Summary Profile for each toddler. The writer was present to observe the process, offer assistance and answer questions. At the end of the practicum implementation period, the dayhome administrator determined the developmental levels and plotted the Assessment Summary Profiles for Assessment III without assistance.

Objective 3. Initiate use of age appropriate curriculum and materials for each child based on previously determined developmental levels.

This objective was accomplished. Wee Folks Nursery dayhome administrator initiated use of the Infant Stimulation Curriculum using developmental levels determined in Assessment I. The Assessment Summary Profile of each toddler clearly depicted the area(s) of development that warranted immediate attention. Once the area of development for each toddler was identified, the dayhome administrator and the writer selected and discussed age appropriate activities, reinforcement techniques and curriculum follow-up. The dayhome staff gathered materials needed for each activity and placed them, along with the curriculum activity cards, in a box labeled - Toddlers.

Following Assessment II, the dayhome administrator expressed that she and her staff felt more comfortable with the curriculum. She began using an abbreviated version of the assessment tool and the curriculum with other children in her program. The writer periodically visited the dayhome to observe structured activities and play periods of the toddlers selected and to monitor use of the curriculum.

The dayhome administrator was given a Right Toys at

the Right Age chart. Copies were made and sent home to the parents of each student. A copy was also posted in each classroom area. On subsequent visits, the writer noted that many toys had been moved from one classroom area to another and several new, age appropriate toys had been purchased for the toddlers.

Objective 4. Write two lesson plans which include preassessment, overall goal, activity, materials needed and evaluation for the designated population.

This objective was also accomplished. Prior to participating in the practicum, Wee Folks Nursery only wrote lesson plans for their three, four and five year old children. If toddlers were enrolled, caregivers concentrated on self help skills and behavior. The toddler's day was basically unstructured. Wee Folks Nursery dayhome administrator completed the first toddler lesson plans (Appendix I), under the guidance of the writer, when use of the Infant Stimulation Curriculum was initiated. The dayhome staff also completed lesson plans using the suggested lesson plan format. The dayhome administrator and staff continued to use the lesson plans throughout the practicum implementation period.

The success of this objective was demonstrated when the toddler caregiver developed and initiated use of the - Infant and Toddler Class Parent Report/

Activities Plan (Appendix I). This parent-caregiver correspondence was a two page report which identified the developmental level, developmental area of concentration, mastered and not mastered objectives and an attached explanatory note to the parent. The writer, dayhome administrator and staff were overjoyed at the positive parent feedback to this project.

Objective 5. Disseminate information concerning specific characteristics of infant/toddler developmental stages based on Piagetian and Ericksonian theory and appropriate tips and activities for home use to parents of the target population.

This objective was overwhelmingly successful. The inservice sessions were supplemented with a weekly newsletter, TidBits for Parents, geared toward increasing parent awareness of infant/toddler development and care, age appropriate dayhome curriculum/materials and home activities. The response to the newsletters was overwhelming. The writer allocated 10 newsletters to each participating dayhome and 10 to the Gary Community Mental Health Center. There was a steady increase in newsletter circulation as shown in Table 1.

A newsletter survey (Appendix K) was attached to each newsletter. The surveys were designed to provide the parents with a means for increasing caregiver-parent communication and to provide feedback

Table 1

Newsletter Circulation

Session	Participants	Newsletters
I	12	70
II	16	100
III	9	100
IV	20	120

to the writer regarding information presented and information requested. The most frequently requested topic and/or comment was for information specifically regarding day care and Black children.

Newsletters were provided weekly but parents had to return a newsletter survey before receiving the next newsletter issue. The dayhome caregivers reported receiving parent calls and notes requesting newsletters that were not sent home. Caregivers also reported that after parents were told the conditions for receiving weekly issues of the newsletters, many dayhome children began arriving with surveys pinned to them. Parents often stopped by the dayhome during the day to return a forgotten newsletter survey. The newsletter survey return rate surpassed the writer's expectations. Table 2 illustrates the survey return rate.

Objective 6. Select or design three activities, with appropriate materials, that correspond with each of the sensorimotor stages as defined by Jean Piaget.

Table 2

Newsletter Surveys

Session	Newsletters	Surveys Returned
I	70	53
II	100	81
III	100	74
IV	120	111

The writer altered this objective because of information gathered on the Background/Proposed Topic questionnaire with regard to participant education, the vast array of material collected for presentation to participants, the fact that the objective was written to include parents and the limited amount of time. The objective was altered to read:

Objective 6A. Select three activities, with appropriate materials, that correspond with each developmental stage in the Infant Stimulation Curriculum.

This objective was accomplished. During Session II-Assessment and Age Appropriate Curriculum/Material Selection, participants played the Developmental Bingo game. The game was designed to teach and reinforce the concepts of developmental stages and corresponding skill mastery. After completing the gaming activity, participants were given samples of an infant/toddler curriculum that was compiled using the Infant Stimulation Curriculum. The activities

in the curriculum were grouped by developmental stages (levels) and did not have ages listed on the activity sheets. Participants were divided into three groups and assigned a developmental stage. The groups were to read through the sample curriculum and select one activity they felt would be age appropriate. They also had to think of alternative appropriate materials they could use to teach the activity. Two of the three groups selected age appropriate activities and all three selected materials that could be use to appropriately teach the selected activity.

Objective 7. Demonstrate an understanding of Ericksonian stages of development using role playing episodes followed by discussion for appropriateness of caregiver response.

This objective was accomplished. During Session II - Assessment and Age Appropriate Curriculum/Material Selection, participants were divided into three groups and given problem situations to generate solutions for. The participants role played their solution strategies before the entire group. Each solution strategy was discussed and the entire group decided whether to agree with the presented solution or to suggest another solution. The role

playing helped to highlight the importance of caregivers becoming aware of the developmental progression of social-emotional skills. A comparison of the results of the role playing pretest and posttest is shown in Table 3.

Table 3

Role Playing Survey Results

Problem Situation	Groups in Agreement Pretest	Groups in Agreement Posttest
I	1	3
II	3	3
III	0	2

Objective 8. Document completion of three training objectives and suggest goals for ongoing professional growth. Several evaluation tools addressed the successful completion of this objective. Table 4 address the steady increase in session participation and summarizes the rating responses obtained on the inservice session evaluation sheets.

Table 4

Number of Participants/Session Ratings

Session	Month	No. of Participants	Overall Rating
I	Feb	12	5
II	March	16	6
III	April	9*	5
IV	May	20	6

*(Drop in number due to Easter holiday week)

Table 5 summarizes the inservice session pre- and posttest data which clearly shows a steady increase in participant understanding of infant/toddler care, development and education.

Table 5

Pre- and Posttest Data

Session	Average Pretest Score	Average Posttest Score
I	3/12	10/12
II	5/13	9/13
III	4/7	6/7
IV	8/10	9/10

The director/staff co-evaluations, conducted at the beginning and end of the practicum implementation period, were used as a pre- and post measure of overall competency in the following areas:

- Professional Qualities
- Classroom Management
- Program Development/Instructional Competency
- Personal Qualities

The data obtained from the final co-evaluation of the dayhome administrator and staff reflected growth in each area evaluated. Goal areas suggested for ongoing professional growth included training in communication skills, decision making skills and parent-caregiver relationships. The pre co-evaluation ratings are summarized in Table 6. The post ratings are summarized in Table 7.

Table 6

Comparison of Director/Staff Pre-Ratings
Co-Evaluation Form

	Professional Qualities	Classroom Management	Instructional Competency	Personal Quality
Director	3	2	2	3
Staff 1	2 / 2	2 / 2	2 / 1	2 / 2
Staff 2	2 / 1	1 / 1	1 / 1	2 / 2

Key: Employee Rating / Director Rating

3 - Superior
2 - Acceptable
1 - Unacceptable
0 - Not Applicable

Table 7

Comparison of Director/Staff Post-Ratings
Co-Evaluation Form

	Professional Qualities	Classroom Management	Instructional Competency	Personal Quality
Director	3	3	3	3
Staff 1	2 / 3	2 / 3	2 / 2	3 / 3
Staff 2	2 / 2	2 / 2	2 / 2	2 / 3

Conclusions

The Infant/Toddler Inservice Program for Dayhome Staff and Parents was a success as indicated by the overwhelming response to the inservice sessions and the increased participant understanding and knowledge validated by collected data.

Participant responses obtained on the Background/Proposed Topic questionnaire not only pointed out a lack of training but also illustrated a desparate need for written material, specifically professional journals, periodicals, newsletters, references, curriculum and assessment instruments.

All objectives were met which indicated to the writer the participants sincere desire to obtain a basic core of knowledge with regard to infant/toddler care, development and education. Recognition of the developmental level at which an infant is busy learning can transform the meaning of infant behaviors for adults (Honig, 1983). With increased awareness and understanding of infant/toddler assessment, developmental levels and curriculum, Wee Folks Nursery dayhome administrator and staff were able to design and initiate use of their own Infant/Toddler Class Parent Report and Activities Plan. The monthly report served as a vehicle for toddler evaluation, parent notification and increased communication between the dayhome and parent.

Understanding of the goals of optimal infant development can infuse daily routines, daily activities and toy provisions with intellectual and emotional awareness of commitment that can marshall and galvanize growth potential in infants (Honig, 1983). The increased awareness and understanding of infant/toddler development enabled caregivers to begin providing developmentally appropriate learning experiences which resulted in a steady increase in performance by the two toddlers as indicated by the Assessment

Summary Profiles. The participants' increased knowledge base resulted in an overall increase in caregiver competence and performance as indicated by data from the post co-evaluation.

It is the writer's conclusion that the participants did benefit from the inservice program. The developmental training and information provided increased the effectiveness of parents as teachers and caregivers as facilitators and the increase in skills and awareness served as a major factor in the developmental gains made by the two toddlers.

Recommendations

1. Obtain information on participants' background, training, and areas of interest so training is relevant.
2. Rewrite or outline information that is very technical or research oriented.
3. Provide resources and as many samples of references as possible so participants have an opportunity to build their own resource/reference libraries.
4. Provide an economical means for filing or compiling information and handouts provided.
5. Provide hands on experience when possible and simulate situations by role playing.
6. Reward participants for active participation and growth.
7. Continue to address community groups in an effort to promote family day care.
8. Continue to address the licensing agency regarding the need for ongoing caregiver training and provision of resources.

Dissemination

A copy of the practicum report has been forwarded to the executive directors of three national associations - the Child Care Action Campaign (1983), National Association For Child Care Management (1972), and Child Welfare League of America (1970) - for consideration of placement in the reference library of each agency.

A copy of the practicum report has also been forwarded to the director of the Mailman Family Center of Nova University for consideration as a reference tool for staff and participating parents.

The writer has requested an appointment with Indiana's 1st Congressional District Representative, Pete Viclosky (D), at which time the practicum format and results will be discussed in addition to the congressman's views on infant/toddler and preschool education. A copy of the practicum report will be presented to the congressman.

The writer plans to present at the 1986 Annual CAEYC Conference in Chicago, Illinois, the 1986 SACUS Conference in Orlando, Florida, and the 1986 NAEYC National Conference. A presentation proposal has been drafted and forwarded.

At the state level, a copy of the practicum report has been forwarded to the Department of Health, Education and Welfare licensing director of day care centers for consideration of possibly implementing the program for day care operators and their staffs.

A copy of the practicum report has been forwarded to the Director of the Lake County Department of Public Welfare, the local licensing agency of family dayhomes. In addition, a proposal addressing the need for ongoing caregiver training has been written and forwarded to the Lake County Welfare Board for funding consideration.

A copy of the practicum report has also been forwarded to another cluster member for possible replication in the Chicago area.

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APPENDIX A

Geraldine Harmon
3536 Massachusetts St.
Gary, Indiana
October 6, 1984

Dear Caregiver:

Your family dayhome has been selected as a possible participant in an early childhood education practicum being implemented. Your name and center location was given to me by the licensing supervisor of the Lake County Department of Public Welfare.

Practicums are actions taken to improve a system, program, or product in early and middle childhood settings. Doctoral students in the Ed.D. Program in Early Childhood Education of Nova University are required to take an active part in improving their professional setting through direct involvement in a solution designed to solve an identified problem.

I have identified the absence of age appropriate caregiver training, curriculum, materials and very little parent involvement in licensed family dayhomes in the Gary area as my practicum problem. The proposed solution strategy will include designing and implementing an inservice program for caregivers and parents in infant/toddler development and education. I am interested in working with dayhome caregivers that service children between the ages of 3-36 months and are interested in improving their centers.

If you are interested in participating, please return the attached form as soon as possible. I am looking forward to working with you. If you have any questions or need for further information, please contact.

Thank you,

Geraldine Harmon
Geraldine Harmon
Ed.D. Candidate

An Infant/Toddler Inservice
Program for
Dayhome Staff and Parents

Caregiver Name _____

Dayhome Address _____

City _____ State _____ Zip _____

Telephone No. _____ No. Children Enrolled _____

Age Range _____ No. Staff _____ Operating Hrs. _____

Additional Information _____

_____

_____

☐ Yes, I am interested in participating in the practicum.

☐ No, I am not interested in participating in the practicum.

PLEASE NOTE: By increasing the dayhome caregiver's awareness of infant/toddler development, the practicum implementor is providing an information base for further growth. Caregivers will be trained on screening techniques, curriculum/materials selection and design based on the screening results, and implementation of a parent/school communication system (newsletter). It is possible that the developmental education will increase the effectiveness of parents as teachers and caregivers as facilitators and that this increase in skills and awareness will serve as major factors in the children's improvement.

****
EXTRAS
****
All handouts, posters, toys and sample curriculum and assessment instruments become the property of participating centers.

Geraldine Harmon
Ed.D. Early Childhood Candidate
3536 Massachusetts St.
Gary, Indiana 46409
(219) 884-6794

APPENDIX B

OBSERVATION SHEET

Observer _____ Date _____ Time _____

I. Facilities

A. Room size

B. Room arrangement

C. Kitchen/Equipment/Eating Arrangements

D. Bathroom/Equipment

II. Program

III. Curriculum

IV. Materials/Toys

V. Record Keeping System

APPENDIX C

NEEDS ASSESSMENT/INTERVIEW FORM

Proprietor's Name _____

Age _____ Years of Operation _____ No. of Staff _____

Educational Background _____

_____

_____

Staff Names	Age	Educational Background
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent Input (description)

Immediate Goals of Center

Long Range Goals of Center

Immediate Needs of Center

Long Range Needs of Center

Immediate Problems of Center

Immediate Interests of Staff

Long Range Interests of Staff

Additional Information:

Geraldine Harmon
3536 Massachusetts St.
Gary, Indiana 46409

Wee Folks Nursery
4260 Tennessee Street
Gary, Indiana

Dear Ms. Holloway,

Welcome aboard! Enclosed are checklists with workshop titles that may be of interest to you, your staff and parents. Please complete a checklist yourself and have your staff do the same.

Including parents is an integral part of the practicum process. For that reason, parent input on workshops of interest is very important. Please send a checklist home with each child enrolled in your program and ask that they be completed and returned to you.

I have compiled a large number of books, magazines, catalogs, curriculum guides and handouts that I wish to share with you. Let's look forward to meeting very soon and discussing our mutual path toward improving family day care in Northwest Indiana.

Sincerely,

Geraldine Harmon

Geraldine Harmon
Ed.D. Early Childhood Candidate
Nova University

APPENDIX E

Dear Caregiver,

Inservice training classes of interest to family dayhome caregivers and parents of enrolled students are being planned as part of a Nova University practicum study. In order to meet your needs and answer questions of caregivers and parents in the community, I would like your ideas and suggestions. Please help by taking a few minutes to complete this questionnaire.

After filling out the general information, please check off those topics which would interest you in attending one or more child care/ early childhood education classes.

With your help, I will be better able to meet the needs of our community. Thank you.

Geraldine Harmon, SLP
Ed.D. Early Childhood Candidate
Nova University

GENERAL INFORMATION

your sex: M F your age: _____ your address: _____

your marital status: married single separated divorced

dayhome caregiver/parent (circle one)

number of years of school you completed: _____

number of children in household/center: _____

their ages: _____

previous child care/ early childhood education classes: _____

PROPOSED TOPICS

_____ early child development (what to expect at various ages)

_____ discipline (how to, types of, most effective)

_____ speech and language development

_____ screening/record keeping

_____ toy/material selection

_____ good nutrition

_____ play and young children

_____ modular systems (constructive room arrangements)

_____ infant/toddler curriculum (what to teach, how, when)

_____ social skills (feeding, toilet training, sharing)

_____ storytelling

_____ immunizations (what, when, why, dangers)

_____ care of the infant

_____ care of the toddler

_____ making your home childproof

_____ child safety (car seats, strangers)

_____ working mothers/single parenting

_____ sleep (expectations and problems)

_____ home care/center care of minor illnesses

_____ taking a child's temperature

_____ care of a child with a fever

_____ over-the-counter medicine

_____ common prescription medications

other suggested topics _____

_____

comments/suggestions for classes (including most convenient times, locations) _____

_____

_____

APPENDIX F

Geraldine Harmon
3536 Massachusetts St.
Gary, Indiana

Dear Sir:

I am presently pursuing the degree of Ed.D. in Early Childhood Education through Nova University in Ft. Lauderdale, Florida. One of several program components is completion of two problem solving practicums. I have chosen the area of infant/toddler development and use of age appropriate curriculum and materials as my practicum target. I would appreciate obtaining a copy of the following material from your agency:

If this material is no longer available, please forward any material and/or information you may have on the target population. (infant/toddler)

Thank you,

Geraldine Harmon

Geraldine Harmon
Ed.D. Candidate
Nova University

BEST COPY AVAILABLE

APPENDIX G

You are cordially invited

to attend

An Infant/Toddler

Inservice Program

for

Family Dayhome

Staff

&

Parents

Four free training sessions

presented by

Ms. Geraldine Harmon
Ed.D. Early Childhood
Nova University
Cluster 14

Please complete and return.

REGISTRATION FORM

Name _____

Dayhome _____

Address _____

Tele. No. _____

Dayhome Staff/Parent
(circle one)

_____ I wish to attend all the training sessions.

_____ I wish to attend sessions

I II III IV

_____ I am not interested at this time.

For more information
or registration forms
contact

Geraldine Harmon
3536 Massachusetts St.
Gary, IN. 46409
884-6794

BEST COPY AVAILABLE

An Infant/Toddler Inservice Program for Dayhome Staff & Parents

Your Presenter

Ms. Harmon is a licensed Speech/Language Pathologist in the Communication Handicapped Program of the Gary Community School Corporation. She holds degrees in Elementary Education, Speech, Hearing and Language Pathology, Learning/Neurological Disabilities and is presently pursuing her doctorate degree in Early Childhood Education.

In addition to her therapy duties, Ms. Harmon works as an Early Childhood Assessment consultant for the Department of Headstart Programs of the Chicago Board of Education. She is a familiar presentor on the workshop circuit, most recently presenting in day care centers in the Chicago area.

SESSION I. Infant/Toddler Development
February 16, 1985

SESSION II. Assessment and Age Appropriate Curriculum-Material Selection
March 16, 1985

SESSION III. Health, Nutrition and the Importance of Play
April 13, 1985

SESSION IV. Dayhome Management for Fostering Parent/Caregiver Partnerships
May 11, 1985

All training sessions will be held at the
OWS Complex
300 W. 21st Ave.
Gary, Indiana
9:00 am - 12:00 noon

Benefits to Participants

- FREE Training Sessions
- FREE Materials at each Session
- FREE Weekly Newsletters
- Films, filmstrips, and Material Displays
- Special Guest Speakers

AND

An opportunity to make new friends and to exchange ideas!!

Each training session will have a voluntary independent study and supplemental reading component which will permit the dayhome provider and staff to set and meet individual goals. Each training session will also be supplemented with follow-up newsletters, TIDBITS FOR PARENTS, designed to provide dayhome staff and parents with ideas and activities for dayhome and home use.

The inservice program proposal has been approved by Mr. Michael Madalon, Director of the Lake County Department of Public Welfare.

APPENDIX H

ASSESSMENT SUMMARY PROFILE

Dev Age	Toi	Cog	RLang	ELang	Eat	Dre	Cor	Loc	Soc
30-36									
Stage 8									
24-30									
Stage 7									
18-24									
Stage 6									
12-18									
Stage 5									
8-12									
Stage 4									
4-8									
Stage 3									
1-4									
Stage 2									
0-1									
Stage 1									

Child's Name _____ Observation Dates C.A. _____

Birthdate _____ (1st)_____ D.A. _____

Parent's Name _____ (2nd)_____ Observer_____

Address _____ (3rd)_____ Phone _____

Comments:

APPENDIX I

LESSON PLAN

Infant/Toddler Age _____ Date _____

Developmental Level _____ Caregiver _____

Assessment Instrument Used _____

_____

_____

I. Activity Goal

II. Materials Needed

III. Activity

IV. Progress Level

A. Satisfactory - Independent

B. Fair - With some assistance

C. Unsatisfactory - Unable to complete

V. Interest Level

A. Interested

B. Somewhat interested

C. Uninterested (Why?)

D. Frustrated (Why?)

VI. Modifications or Follow-up Activities

LESSON PLAN

Infant/Toddler Age 1-3years Date April 1985

Developmental Level 2yrs (TB) Caregiver Ms. Vincson

Assessment Instrument Used Infant Stimulation Curriculum

I. Activity Goal To stimulate every aspect of a child's growth.

II. Materials Used balls, pull toys, 3piece wood puzzles, trike

III. Activity Locomotion - gross motor activities (large muscle)
Skills - (Socialization) - getting along with other children, sharing, group play
(Coordination) - overall body control

IV. Progress Level (Period 3/25 - 4/26, 1985)

A. Satisfactory - Independent

(B.) Fair - With some assistance

C. Unsatisfactory - Unable to complete

V. Interest Level

(A.) Interested

B. Somewhat interested

C. Uninterested (why?)

D. Frustrated (why?)

VI. Modifications or Follow-up Activities - More of same. Begin fine motor skills and more social skills. Stress expressive language throughout (vocabulary)

LESSON PLAN

Infant/Toddler Age 1-3 years Date April 1985

Developmental Level 18 mos. (CJ) Caregiver Ms. Vineson

Assessment Instrument Used Infant Stimulation Curriculum

I. Activity Goal Receptive and Expressive Language improvement.

II. Materials Needed ~~Items~~ for labeling. (Toys, clothing)

III. Activity Coordination & Locomotion (focus in these areas)
Skills - Have child label while playing with caregiver - dressing, undressing
block building,
balance beam

IV. Progress Level

(A.) Satisfactory - Independent

B. Fair - With some assistance

C. Unsatisfactory - Unable to complete

V. Interest Level

(A.) Interested

B. Somewhat interested

C. Uninterested (why?)

D. Frustrated (why?)

VI. Modifications or Follow-up Activities - Send sample activity sheet home. Continue above format.

Infant And Toddler Class....

5/85

Age 1½ yrs. Receptive (CJ)

Yes → 1. Recognizes pictures of familiar objects and people

Yes → 2. Understands most simple questions/commands

No → 3. Points to own body parts on request

Age 1½ yrs. Expressive (CJ)

Yes → 4. Imitates words

No → 5. Points to make wants known

No → 6. Has a speaking vocabulary of 5 to 10 words

No → 7. Begins to use two word phrases

Yes → 8. Uses expressive jargon (unintelligible language)

Parent:

Dear Ms _____,

In the (No) areas, please work with your child at home. We will be monitoring her progress on a monthly basis, and on each monthly Infant/Toddler Parent Report - Activity Sheet through May. Look forward to receiving your (late) May report. We will discontinue the parent report in June, 1985 due to decreases in enrollment. The reports will be resumed in October of 1985.

Thank you,
Ms. Vincson
Toddler Caregiver

C.H.
Director
Wee Folks
C.H.

TidBits for Parents

Issue I Vol. 1

FAMILY DAY CARE PROGRAMS

The most flexible programs that can be made available in rural, urban and suburban communities alike, if families so wish, and therefore bring day care services to larger numbers of families who need it on a planned basis, are those known as family day care service programs. In addition to flexibility, other sound reasons exist which make this type of care highly suitable though it may be the least well known.

?? FIGURE THIS ONE ??

Years ago I married a widow who had a grownup daughter. My father r. visited me often, fell in love with my step-daughter and married her. Thus he became my son-in-law and my step-daughter became my mother because she was my father's wife. Soon after this, my wife gave birth to a son which, of course, was my father's step-brother and my uncle because he was the brother of my stepmother. My father's wife also became the mother of a son. He was of course, my brother and also my grandchild for he was the son of my daughter. Accordingly, my wife was my grandmother because she was my mother's mother. I was my wife's husband and grandchild at one time, and as the husband of a person's grandmother, was the person's grandfather. I became my own grandfather!

THE INFANTS WE CARE FOR

In work on optimal development during infancy, professionals have come to the conclusion that the central ingredient in any recipe for a healthy start in life features large amounts of human contact, especially in the first few years of life. In the first six months, an adult's primary parenting role is in establishing a sense of interpersonal security in a baby. From six months to about two years, the responsibility of the adult becomes much more complicated in that she or he is the facilitator of several major developments in the child, including language, motor mastery, and exploration, which together underlie lifelong competence and happiness. Personality development hinges upon the quality of the human relationship during the first two years of life. The overriding goals for the optimal outcome of the first two years of life for any baby, regardless of setting or kind of caregiver should be:

1. Development of a health body
2. Development of an active mind
3. Development of security

STAFF TRAINING

Family day care programs must provide continuing opportunities for training toward greater competence for parents and other staff members. Skills in policy and decision making required for the operation of programs can be learned and should be included in the training along with learning theory, the sequence of development, health, nutrition and the importance of play. Look forward to the presentation of these topics in upcoming workshops.

SESSION II. March 16, 1985
9:00-12:00 noon
ONS Complex
300 W. 81st Ave.

RECIPE FOR BRIGHT, HAPPY KIDS

The brightest, happiest, most charming children spend their earliest years in remarkably similar ways, researchers say. They listen to adult conversations, roam freely around their homes and spend a lot of time staring.

Prof. Burton L. White of Harvard University says, "A rich social experience is the best thing you can do to ensure a good mind." For the child, this means seeking attention from the mother, following her around and learning cooperation.

How a child will turn out depends on his experiences before the age of three (3). Prof. White said a close study of 39 children up to age 3 demonstrated these crucial factors in child development:

Live language.
Frequent steady staring.
Freedom of movement.
Responsiveness of adults.
Exploring objects.
Spacing of childbirths.

BABY SURGERY BEFORE BIRTH

In the last four years, dramatic medical breakthroughs offer hope that for some prenatal disorders identified can be corrected while the baby is still in the womb.

The most important prenatal diagnostic tools in use today are ultra-sound, also called a sonogram or sonography, and amniocentesis.

INFANT/TODDLER EDUCATION

Babies are our stake in the future. Love him, guide him, and he will flourish.

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TidBits for Parents

Issue I Vol. 2

PROTECTING THE PRESCHOOLER

The toddler moves quickly but has little appreciation of impending danger. Continually, she is onto, into, and above everything in her path. As the toddler's curiosity grows, your job will involve more supervision as well as education. The meanings of the words, "hot," "stop," "sharp," "danger," and especially the word "no" often must be explained over and over again.

While a certain amount of discipline will be necessary, often a firm statement will suffice. Other times, verbal reward and added privileges are as meaningful as a barrage of "don'ts" and "nevers," especially when a child has learned or obeyed a safety rule.

WHY YOUR BABY NEEDS A CAR SAFETY SEAT

- A car safety seat gives your baby the comfort and support it needs to travel happily in a car.
- A car safety seat keeps your baby securely in place if you have to swerve or stop suddenly. You can give driving your full attention and not worry about baby falling and being hurt.
- A car safety seat, with harness and seat belt tightly fastened will provide the best protection for baby.

CHOOSING AND EVALUATING DAY CARE

The following suggestions may help you in choosing a day care center:

- Visit the center at a time when you can observe the children's activities and interview the director.
- Visit the facility more than once, with one of the visits unannounced.
- Schedule one of your visits near closing time so that you can discuss the program with other parents as they come for their children.
- Determine whether the children receive the kind of individual attention you would like for your own child.
- Discuss whether or not the center encourages parents to visit and to ask questions.

BABY'S MOUTH INVESTIGATES

Infants and toddlers investigate the world around them with their mouths. During the first few months of his life, baby will be sucking on anything with which he comes in contact: his fist, his pacifier, and later his toys and crib slats. As he gets older all the household objects are scrutinized in this manner. Unfortunately, the more a explores with his mouth, the greater the chances of accidental poisoning.

While items such as shoe polish, cleansers, ink, glue, lye, bleach, paint, dyes, painted plaster, and detergents are known poisons, even seemingly harmless cosmetics can be potentially dangerous. A child trying out mother's lipstick or dad's aftershave lotion may look terribly cute, but the results may not be. Keep these items well out of reach!

TOILET TRAINING YOUR TODDLER

One of the most frequently asked questions is "When is the best time to begin toilet training?"

There is no specific age that one can state as the perfect age to start. It is important to understand that in order for a child to cooperate in toilet training, he must have the muscular maturity to control his urination and his bowel movements. Also he must be able either to communicate that he wishes to go to the bathroom or be able to get there by himself. In most cases these conditions will probably not be present until the child is 15 to 18 months old. It is possible to "catch" a younger baby and have him perform on schedule, but at these early ages, it is the mother who has been trained to recognize the child's signals rather than the child having been trained to perform independently. Also, babies whose toilet training has begun very early are likely to lose interest when they are toddlers and the mother must begin all over again.

VALUABLE REFERENCES FOR CAREGIVER & PARENTS

1. What to Teach Your Child. Elizabeth Wila, (1978), Continental Press, Inc.
2. Readiness for Kindergarten. James D. Massey, (1975), Consulting Psychologists Press.
3. Teacher's Practical Guide for Educating Young Children. Sydelle N. Kateff Research for Better Schools, Inc. (1981).

DON'T FORGET SESSION II
March 16, 1985
ONE CENTER
9:00 a.m.-12 noon

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TidBits for Parents

Issue I

Vol. 3

A Baby's Soft Spot

An infant's brain is a delicate organ, and any impact to the skull can, of course, be dangerous. You should not be afraid, however, that touching, gently rubbing, or washing a baby's head will harm her, since the soft spot, or fontanel, is not soft at all--it is well protected by a tough membrane underneath the skin.

A baby's soft spot is sensitive in that it can be an indicator of illness, notes Dr. Doris A. Trauner, head of the division of pediatric neurology at the University of California at San Diego School of Medicine. Normally, the anterior fontanel should appear flat or slightly depressed when an infant is sitting up; it might look a little fuller or more rounded when she is lying down. A sunken fontanel may be a sign of dehydration, while bulging may indicate pressure inside the brain. A fontanel that is open until approximately eighteen months is also a good sign of healthy brain growth. If it seems to be closing too quickly -- before twelve months -- it may suggest improper brain growth or a problem with the bones fusing too rapidly. Medical attention is then warranted to determine the cause of the problem.

SINGLE MOTHER'S DILEMMA
Toilet-Teaching A Son

While it can be helpful for a little boy to watch his father, millions of children have learned to use the toilet without having someone consciously model for them, and certainly many mothers have taught their sons. Modeling demonstrates the method, but it is not the only objective in toilet-teaching, explains Judity Myers-Walls, professor of child development at Purdue University. The major tasks are gaining control over bladder and bowel functions and recognising body signals. These abilities develop over time, and toileting cannot really be learned until a child is ready.

Signs of readiness include being dry for several hours at a time, discomfort at being wet, and showing an interest in the toileting process. Once a child is ready, starting gradually and without pressure should yield the desired results.

LET THE SUN SHINE IN

March 21 marks the beginning of spring on the calender. But spring really begins when you wash your winter-streaked windows to let in the sunny freshness of the season. Here are some tips to take you through the ritual easily:

* First, don't attempt window washing on a sunny day. The windows will dry too fast.
* Never use soap. Use ½ cup ammonia, ½ cup white vinegar, and 2 tbs. of cornstarch in a bucket of water.
* Crumpled newspaper shines the windows best. Use vertical strokes on inside and horizontal strokes on the outside.
* Bring windows to a sparkling shine by rubbing a blackboard eraser over them.

Dining Out With A Toddler

Going out to dinner and can't find a babysitter? In many countries parents of small children don't have that problem — they take their youngsters with them. Americans traveling abroad are often surprised to see families with infants and toddlers dining out at fine restaurants. Even more astonishing is how well behaved these children are in such circumstances. It's no accident that youngsters in other countries are so comfortable in adult social situations. Toddlers whose parents take them out with them regularly learn what the outside world is like and how to behave there. They also learn to be less afraid of new people and places than children who are usually left at home. If you are considering becoming a "family diner", here are some tips to help you have a pleasant evening:

1. Make sure the restaurant is comfortable having toddlers.
2. Make sure there will be a high chair available.
3. Bring familiar food from home, just in case your child doesn't like what is available.
4. Bring a child-size spoon.
5. Take along quiet toys.
6. Ask for a table by the window.
7. Be careful about the foods you choose.
8. If your toddler is disruptive it is no time to be punitive.
9. Finally, relax and enjoy yourself.

Excerpt from Parents Magazine 3/85.

DON'T FORGET SESSION III

Health, Nutrition, and the Importance of Play
9:00-12:00 Noon
ONS
300 W. 21st Ave
April 13, 1985

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Tid Bits for Parents

Issue II Vol. 1

CHOOSING AND EVALUATING DAY CARE

While a license tells you that the facility has been inspected and meets basic licensing requirements, you, the child's parent, must decide whether the program meets your child's particular needs. The following suggestions may help you in evaluating grouping and staffing used in day homes with infants and toddlers attending:

Age	No. of Staff	No. of Child.
6wk-15mo.	1	4
15mo-2yrs.	1	5
2 years	1	8
3 years	1	10
4 years	1	10
5 years	1	20
School - Age	1	20

A good rule of thumb is to also check to see if staff changes are minimized to ensure consistent relationships between staff and children

TEETHING IS A NATURAL PROCESS

During teething the primary teeth -- also known as deciduous, milk or baby teeth -- gradually push up through the gums. These eruptions may cause the gums to become swollen and tender...and your baby may react to this discomfort by becoming restless and irritable as well as tearful and wakeful. Usually your baby's first tooth will erupt between the fourth and eighth month of infancy, and all primary teeth should have erupted by the age of three years.

NUTURING DIFFERENT TYPES OF INTELLIGENCE

Howard Gardner, a Harvard University psychologist, has identified six types of intelligence: linguistic, musical, logical-mathematical, spatial, bodily-kinesthetic, and personal intelligence ("people" skills, for example). Gardner is beginning to study the different ways in which preschool children approach common learning tasks. He is also studying how to determine each child's "intellectual propensities" and how they can be developed and strengthened. Meanwhile, in his book, Gardner argues for what he calls "rich and provocative" learning environments for children. In contrast to Gardner's work, the current emphasis on a return to restrictive learning settings may result in neglect of your child's most promising kinds of intelligence.

Looking ahead to how you may best prepare your child for adult success, it is interesting to note that Dr. Siegfried Streufert at the Hershey Medical Center College of Medicine of Pennsylvania most successful corporate leaders use what he calls "multi-dimensional thinking." So, contrary to the simplistic, one-track "back-to-basics" people who advocate a narrow, workbook dominated classroom, you as a parent should not cheer such reform, you should reject them!

FRANCIS MOSENTS, Ed.D.

TEETHING, cont.

between the fourth and eighth month of infancy, and all primary teeth should have erupted by the age of three years.

REMINDER... REMINDER

Session III Health, Nutrition and the Importance of Play
April 13, 1985
ONS
9:00-12Noon

COPING WITH KID'S AGGRESSION

According to developmental theory, aggressive impulses or drive are born in the human child and are a crucial aspect of the psychological life force and of survival. In the course of healthy development, these drives are normally expressed in various behaviors at different ages and, with assistance from parents and others, are gradually brought under the control of the individual--moderated, channeled and regulated but by no means stamped out. We expect that young children who are developing normally will display aggressive behavior--both physical and verbal--toward adults, other children, and objects in their environment.

TEETHING AGE DOES VARY

Teething age varies, so don't worry if your baby teethes somewhat sooner or later than other infants of the same age. Time of teething bears no relation to the intelligence of your child, and only rarely does late teething suggest a health problem. However, it is advisable to speak with your pediatrician or dentist if your baby's first tooth has not appeared by the first birthday. Another interesting point: Teething age is genetically determined, so children in the same family often teethe at approximately the same age.

Information TidBit

Babies are born with a reserve of energy called glycogen. Until this stored energy is used up, baby will sleep a great deal and drink very little formula the first few days.

Tid Bits for Parents

Issue II Vol. 2

HELP STOP INFECTIOUS DISEASES

When your child shows symptoms of a communicable disease (diarrhea, vomiting, fever, cough, rash), keep him or her out of the day care center. The child may be kept at home or in a setting where no other children are present--a relative's home, for example. Bring the child back to the center only after recovery.

If the symptoms last for three days or longer, call your family doctor for advice, even if your child seems well otherwise. The doctor may wish to order laboratory tests of stool specimens for a child ill with diarrhea.

Children who wear diapers should be dressed for the day care center in a way which will not allow them to put their hands inside their diapers. Garments such as coveralls which button at the sides are a good choice.

Parents should also take an active role in teaching their children how and when to wash their hands with soap and water. Instruct your children that their hands should always be washed after each trip to the toilet and before eating each meal or snack.

DON'T FORGET SESSION IV

May 11, 1985
CMS Center
9:00 to 12 noon
Parent/Teacher Partnerships
Bring a friend!!!

IMMUNIZATION

Every child and every family should have the lifesaving protection of immunization--sometimes called vaccination. From early infancy, immunization guards against dangerous infectious diseases, keeping our communities free from epidemics and preventing such serious ailments as diphtheria, tetanus, whooping cough, measles, mumps, polio, and rubella.

Smallpox, which formerly presented a serious risk, has been essentially eradicated through a world wide vaccination effort. Now the chance of catching smallpox is so slight that routine vaccination of infants and children is no longer recommended in the United States. Typhoid fever, too, has been all but eliminated in this country, largely by improved sanitary measures. However, vaccines are available to prevent smallpox, typhoid fever and other ailments if you should travel where these diseases occur. Tireless research goes on to find new and better ways to protect people from all diseases.

SNACKS

Snacks are needed for many preschool children who seem to use up more food than they can eat at meals. Some well-chosen snacks are: milk, small pieces of fruit, cut-up raw vegetables, cheese cubes, crackers spread with cottage cheese, hard cooked eggs, nuts. These snacks "carry their weight" in food value and do not foster tooth decay. Although sweet snacks supply energy, they have little other food value and are hazardous to teeth, so are offered only once in awhile.

REMEMBER TO RETURN YOUR NEWSLETTER SURVEY TO YOUR DAYHOME DIRECTOR!!

HEALTH RULES

You can help to protect your family and your children from disease by following these five simple health rules:

- Take your children to your physician or health center for periodic checkups because-- Expert supervision can help to protect your family against disease.
- Keep young children away from sick people because-- We breathe in germs which sick people spray into the air with a cough or sneeze.
- Teach children to wash their hands after using the toilet and before meals because-- Some diseases invade the body from hand to mouth, especially when we eat.
- Try to be sure that the water your children drink and the foods they eat are safe because-- Some diseases come from polluted water and contaminated food.
- Cooperate with your local and state health agencies and with your school health services on community health programs because-- Public health programs are meant to protect your health as well as the health and safety of everyone in your community.

INFECTIOUS DISEASES IN GROUP SETTINGS

Children in dayhomes and centers are exposed to a wide variety of diseases. Major symptoms of many of these diseases are vomiting and diarrhea. One out of five children will probably develop diarrhea at some time during the first five weeks of day care.

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TidBits for Parents

Issue II Vol. 3

TOY SAFETY

Not all toy-related injuries can be prevented by government regulations. New and old toys around the house should be checked for possible hazards.

Since many children are injured by falling on and misusing toys, they should be taught responsible, safe play habits.

The U.S. Consumer Product Safety Commission has the following suggestions for toy safety:

- Toys should suit the skill ability and interests of the individual child. Avoid toys that are too complex for young children.
- Remember that a toy that is safe for an 8 year-old may be hazardous for a younger child.
- Avoid toys with small parts for children under three years age.
- Look for labels that give age recommendations such as "Recommended for Children Three to Five". Also use your own judgement in deciding whether a toy is too difficult for a young child.
- Avoid toys that shoot objects that can injure eyes.
- Explain to the child how to use toys properly and safely.
- Encourage children to put toys away.
- Examine toys periodically; repair broken toys and discard toys that cannot be fixed.

THE RIGHT TOYS AT THE RIGHT AGE

Toy-shopping brings out the child in each of us. We feel the "Oh, wow look at this!" excitement. It takes us back to a time when happiness was a red scooter or a ballerina doll. Where else can you find your old bed time friend, Raggedy Ann, or your tea-party pal, Teddy Bear?: "I had one of those!" you hear yourself saying.

Yet parents sometimes take these sentimental journeys without really remembering just when they enjoyed what. Toys, like clothes, have to fit the child or they'll get in the way of her play. What's challenging to a four-year-old is frustrating to a two-year-old and too babyish for a seven-year-old. As a child's physical, intellectual and social skills grow, so does her need for toys that match her growing abilities and changing interests. When you're shopping:

- Look for toys that invite the child to play; avoid toys that perform while the child watches.
- Select a variety of playthings-toys for active physical play and others for sitdown quiet times; toys that can be enjoyed alone and toys that involve playing with other kids.
- Be sure the toy is sturdy, and built to take the unexpected.
- Avoid novelty items that become unusable if one piece is lost or broken.
- Look for playthings that have multiple uses; avoid those with "one-shot-and-it's-all-over" charm.

DON'T FORGET SESSION IV

May 11, 1985
OMS Center
9:00 to 12 noon

All participants that have attended three (3) sessions will be awarded certificates of 12 to 16 hours of training. Come and bring a friend!

SPEECH IMPROVEMENT GUIDES FOR PARENTS AND TEACHERS

Many children are very slow in learning to talk plainly. Long after the age when they should be able to express themselves in distinct speech they may still be using "baby-talk", lisping or speaking in a muffled, unintelligible way. There is usually much that a wise parent or teacher can do to improve the speech of such a child. It is important to do something early about speech difficulties. If allowed to continue, poor speech becomes more fixed, it interferes seriously with good school work and also handicaps the child, sometimes permanently, in social relationship with adults or other children. Some children outgrow such difficulties, but many do not, so it is best to be on the safe side and do something constructive about improving their speech early.

First of all, the parent should be certain that there is not something wrong with the child's speech organs. Secondly, if nothing is wrong with the speech organs, another possibility is that the child may not hear very well. Most cases of speech difficulty in young children, however, do not result from either poor hearing or from abnormalities of speech organs. Poor speech is usually due to factors in the child's environment, such as poor speech in other members of the family, lack of incentive to speak or to general babyishness or immaturity of the child. It is a striking fact that most children who still talk "baby-talk" when they enter school are also more babyish in their habits, more dependent on their parents for care, more inattentive, more easily upset emotionally and have poor vocabulary for their age.

TidBits for Parents

Issue III

Vol. 1

FOOD BEFORE AGE SIX

Your child masters many skills during the first six years. Learning to eat is one of the most important. What you know about food, the food you serve, your food likes and dislikes, and the mealtime "climate" in your home all help to mold your child's food habits and attitudes. Happy mealtimes are a family affair. Children, like adults, usually like to have company while they eat. They need to have fairly regular meals. A quiet time before meals lets the child "slow down" and be ready to eat. Calm people and calm surroundings during meals help a child to enjoy eating. Young children need some guidance in table behavior. Consistency in what parents expect and accept is important.

Parents who serve a variety of suitable foods and take a casual, easy attitude about what, how much, and how their offspring eats build their child's sense of trust in the world, along with good food habits.

GUIDELINES FOR SELECTING INFANT'S AND CHILDREN'S CLOTHING

Clothing requirements for individual children vary with stages of growth and development and the activities that accompany each stage. Yet certain features are desirable in clothing for all ages. Every youngster's clothing should provide freedom of movement, protection from severe weather and room for growth. Equally important are safety

FOOD FOR THOUGHT

Remember! The food habits your children develop in the first five years will be with them always. Besides encouraging good eating, you can encourage good cooking skills! Children love to do what you're doing, and I'll bet you do a lot of cooking. They will feel important if they can help in preparation of simple foods, and you will be effectively teaching--you're the first and best, remember.

Children can learn cooking vocabulary, beginning measurement techniques, stirring, rolling, pouring, cooking methods, and cleaning up habits. If cooking is fun for them, they will be eager to continue with developing cooking skills and good nutrition through-out the years. They'll enjoy the food more, too, if they had a hand in its preparation.

Young toddlers can help in choosing vegetables at the supermarket or garden, washing them and helping clean up. They are also good at stirring for pancakes, jello and puddings, and different mixtures. They will be learning new words, and some measur of independence. As children get older, they can begin pouring from the measuring cups and learning concepts of amounts and can roll and cut out dough for biscuits and healthful cookies made with honey instead of sugar. Popping corn, making applesauce or cranberry sauce is fun and a learning experience. Next time you'r in the kitchen, try letting the little tyke help out!

Continued from Column 1

comfort and ease of care. Regardless of whether you are buying for an infant, a toddler or a preschooler, you will want to consider the following:

THE SPECIAL WORLD OF CHILDREN

Children live in a wonderful world all their own. It's a world of the young, filled with rough and tumble play, quiet discovery, tug-of-war and laughter, and occasionally tears. The growing-up years are a time of constant movement...and change. At each stage of the child's development there is a corresponding pattern of growth--and with each new activity comes very special requirements for infants' and children's clothing.

Today's toddlers are lucky. Not so very long ago they would have been dressed like small adults. No one really thought children had individual personalities and distinct needs all their own. Now we know better, for we're aware that clothing contributes to a feeling of self confidence and sound emotional development. Beginning with baby's first layette, comfort, safety and freedom are of great importance in helping to insure a carefree happy childhood.

Continued from Column 2

- design of garment
- proper fit
- growth features
- quality workmanship
- care requirements
- personality of the child

DON'T FORGET SESSION IV

May 11, 1985
CMS Center
9:00 to 12 noon

This session will focus on the parent/teacher partnership. Come and bring your student's parents.

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TidBits for Parents

Issue III Vol. 2

NEW FOODS

New foods bring new tastes, new colors, new looks new odors, and new textures. A child who has frequent chances to try new foods early in life will probably continue to accept new foods later in life.

Try offering only one new food at a time. Ask only that a tiny taste be taken the first time. Say that a new food may taste sweet, sour, or salty. It may help to offer familiar foods with a new food. Let your child see you eat and enjoy the new food. Expect the food to be liked.

Be casual about new foods whether a child accepts or rejects them. Avoid forcing the food or making a fuss about it. If a food is rejected several times, try to find out what about it is disliked. A change in the way you prepare or present it may make a difference.

FAVORITE FOODS

Favorite foods please a child, just as they please us. Serving favorites occasionally is one way to make eating a pleasure. By pleasing children from time to time when small, we help them want to please us as they grow. Children will be more willing to try other new things they are offered.

LIKES AND DISLIKES

Likes and dislikes of a small child sometimes change suddenly. Odd notions about food may appear during early years. Usually, if no one pays special attention to these quirks, they will be outgrown. Of course, adults

EAT OR NOT EAT?

If you are tempted to coax, play games, or force your child to eat, remember how you dislike having food forced on you. Forcing food does not teach good food habits--it only proves that you are bigger than the child. Instead, make a wide variety of good foods available to your child. Then let your child decide to eat.

Children who can help serve themselves have a feeling of usefulness and may have increased interest in eating. Let your child help set the table, put food on the plate, and pour milk from a child-sized pitcher.

YOUR CHILD

Your child is one of a kind: an individual--different in some ways from all others, alike in other ways. Respect and expect differences.

LIKES AND DISLIKES CONT.

likes and dislikes are quickly noticed--and copied--by small children. So set a good example!

DESSERTS

Desserts that are served casually as a usual part of the meal will not seem more desirable than other foods. Wholesome desserts--custards, milk puddings, ice cream, fruit and fruit in gelatin, molasses or oatmeal cookies--contribute to health and growth and are a proper part of the day's food. Pies, cakes and other rich desserts have less to offer nutritionally, but they can be served now and then.

EYE CATCHING FOODS

Bright colors--orange carrots, green peas, red tomatoes--catch young eyes. Mild, delicate flavors, young carrots, new potatoes, custard, bananas--frequently suit young tastes. Textures little folks enjoy include soft-cooked eggs and tender moist meats.

APPETITE

Appetite may vary from one meal to another, and from day to day. A child's rate of growth, activities, and state of health all influence how much is eaten. If the child is overtired, excited, in strange surroundings, or if the routine has been changed, appetite may lag. Physicians now suggest that the child is usually a fairly good judge of how much can be eaten.

SELF FEEDING

Self feeding is a chance for children to do something really useful for themselves. When children can feed themselves, they gain confidence in their abilities to learn to do other things that adults do.

Expect your small child's feeding efforts to be messy. Skill will come with practice. But don't expect adult standards in table manners.

Eating with their fingers is comfortable for little folks. Small sandwiches, raw vegetable bits, meat cut in bite sizes, fruits and cheese in small pieces to pick up with the fingers make eating much easier.

Even though eating with fingers is easy, the young child wants to use spoons and forks as adults do. When a child wants to try, give encouragement--or your child may decide the job is for a parent.

Even after feeding themselves well, small children may sometimes need help--when tired, upset, or bored.

GERALDINE HARMON
Education Specialist
1058 W. 61st Avenue
Merrillville, In. 46410

TidBits for Parents

Issue III Vol. 3

What your child needs from home when home is all of every day

The whole of her enjoyment, occupation and learning is in your hands. She will experience nothing new unless you arrange it; she will go almost nowhere unless you take her; she will have no fresh play material unless you provide them nor friends of her own age unless you find them for her. Each day you have to ask yourself what new material for thought and action you have fed her.

Her day is no longer broken up by naps so it needs breaking up and structuring by complete changes of activity and place. Solitary play indoors while you are busy in the morning needs a recognizable end with a morning snack and then something different--a walk or active play in the yard. She needs a routine that is both predictable and varied.

Although you are the most important people in her life you are not enough. She needs to meet every sort and kind of person. She needs individual adults to make friends with; she needs individual children to be a pair with; she needs groups of children to see what group life is like and how it works.

Without your direct and concentrated help she probably will not muster the effort and persistence needed to conquer tasks she finds really difficult or frustrating. She needs time with you to master that puzzle, cut out a crown neat enough to satisfy her or to finish her clay model with paint.

Without ideas and information from you whole worlds of play-learning will stay closed to her. She cannot conjure the idea of a book; a record or a radio program out of her head. She needs you to introduce her.

What your child needs from home when a group is added to it

Much of her interest and her energy is being mopped up at the group. Her teachers present her with new experiences, take her on expeditions, provide fresh play materials and help her to work with a group of children her own age. She is probably stretched to her limits. Your job is to keep home and its familiar objects and people just as they were before.

Her day is totally broken up by group attendance. Time before group in the morning is just waiting time. After group, at lunch time, she may need an actual nap or at least a rest. For the remainder of the day she needs time just to be herself; to contemplate, to mess around.

She did not have you at group. She will need a chunk of your time and attention now. She may have had enough of all other people and need peace of mind and solitude rather than tea parties.

Group activities will usually include all the concentrated careful work of which she is capable. Spurred on by the other children and by skilled teachers she will be stretching herself on "educational" play. Home play will need to be easy, as well as fun.

Different groups will emphasize different types of activity. She will need from need from you what the group does not provide. She may have had enough of stories and music and may need yard-romps instead or she may have climbed and swung and pedalled all morning and needs stories from you.

Reprinted from Penelope Leach's Your Baby & Child, Publisher: Alfred A. Knopf

Geraldine Harmon
Education Specialist

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TidBits for Parents

Issue IV Reprinted from SEARS Hidden Values Series Vol. 1

GROWTH AND DEVELOPMENTAL CHARACTERISTICS
to help guide the selection
of designs and styles for
specific age groups are:

Age 2 Years	From 2 years of age on, large muscles are developing rapidly; he runs, climbs, and slides. Can undress himself; can identify parts of clothing, but needs help in dressing. Is slow and dawdles. Expects routine. Notices people and imitates. Loves color and the feel of cloth. He is possessive, but wants to play with other children though he can't get along with them happily. Likes to take things apart and put them together or fit one object inside the other. Clothing should be colorful, but simple in design.
Age 3 Years	Usually, the 3 year old tries to please and conform. Generally, grows rapidly--3 to 4 inches during the year. If able to reach, he can learn to hang up clothes. Wants approval and attention and likes friends of his own age. Begins to notice sex role differences. Learns to identify colors. Becomes more skilled at dressing, but still is better at undressing. Clothing with self-help features will encourage the child to dress and undress himself.
Age 4 Years	Laces shoes, but frequently needs help in tying them. Wants friends and notices what they wear. Very active. He can dress and undress himself so clothing should be designed for independence in dressing. Clothing specifically for dress-up play and imitating adults is enjoyed.
Age 5 Years	Says "good-bye" to babyhood. He can usually dress himself completely except for the most complicated fasteners. Hates criticism and wants to be a member of the "group". Many children go to kindergarten at this age and need clothing that they can manipulate. Begins to acquire ideas about clothing and is influenced by people outside the family. Clothing selection can now be a shared experience between parent and child.

Geraldine Harmon Education Specialist 1058 W. 61st Avenue Merrillville, In. 46410

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TidBits for Parents

Issue IV Reprinted from SEARS Hidden Values Series Vol. 2

GROWTH AND DEVELOPMENTAL CHARACTERISTICS
to help guide the selection
of designs and styles for
specific age groups are:

Age Birth -- 3 Months	Growth is rapid. Clothing purchases should be limited to a few items that can be laundered frequently. Warmth, comfort, washability are uppermost concerns in clothing. Clothing should be designed for ease in frequent changing.
Age 3 -- 6 Months	Rapid growth continues. Learns to hold head up and turn over. (4-7 months) Likes to be propped up so he can look around. Clothing must move with him as he reaches and waves arms and legs in the air.
Age 6 Months - 1 Year	Learns to sit-up by himself. Learns to pull himself up in crib or playpen. Enjoys games like "peek-a-boo", "bye-bye" and "pat-a-cake". Needs clothing that will keep him warm, but not interfere with crawling. Less sleeping time is required while an increase in activities necessitates more clothes for wide awake hours. Clothing that goes over the head too tightly is usually disliked.
Age 1 Year -- 18 Months	Learns to stand by himself and walk. Hand coordination becomes finer and he learns to pick-up small pieces of food. Likes to handle a spoon and tries to use it. Loves to throw things and watch them drop. Energy becomes boundless. Clothing should be designed to avoid frustrating his desire for movement.
Age 18 Months -- 2 Years	Is constantly active. Learns to run with a stiff, flat gait with feet wide apart. Abdomen protrudes a little and arms are held slightly away from the body. Goes up and down stairs one step at a time, frequently in a sitting position. Uses whole arm movements with ball playing. Clothing takes a beating with all the activity.

Geraldine Harmon Education Specialist 1058 W. 61st Ave. Merrillville, In. 46410

Issue IV

TidBits for Parents

Vol. 3

Do's for Persons Working With Young Children

1. Do arrive promptly
2. Do learn names of children quickly
3. Do learn where things are kept
4. Do ask questions freely about children, procedures, and equipment
5. Do share your own experiences
6. Do tell stories, play games
7. Do make the classroom richer for having been there
8. Do work at the child's level when possible; sit or stand with the child
9. Do give instructions clearly
10. Do be consistent in rewards
11. Do handle accidents matter-of-factly and quickly
12. Do speak positively
13. Do discuss ideas and suggestions freely
14. Do question the teacher privately if you disagree with anything you are asked to do
15. Do respect the privacy of any information regarding the children
16. Do make sure the child experiences some success each time they see you
17. Do change to an easier task if the child is having trouble accomplishing a task and becomes frustrated
18. Do enjoy the situation; keep a good sense of humor
19. Do communicate with the teacher regularly
20. Do leave your work area as you find it
21. Do guard the child's need for privacy
22. Do give the child time to think of the answer
23. Do create a good rapport with the children before you start to help them

THANK YOU ALL FOR PARTICIPATING IN

THE INFANT/TODDLER INSERVICE SESSIONS.

Geraldine Harmon
Ed.D. Candidate, Early Childhood
Nova University, Cluster 14
(219) 884-6794

Don'ts for Persons Working With Young Children

1. Don't belittle a child or make comparisons between children
2. Don't hit a child under any conditions
3. Don't visit with other adults while on duty
4. Don't do work for children, such as draw pictures for them, tell them answers
5. Don't rush the children or nag them
6. Don't use your feelings as a weapon
7. Don't criticize the teacher to children or to parents. Tell the teacher your criticism
8. Don't start projects with children you can't finish

Parents as Partners: The Key to Success

Helping your child get off to a good start in his academic career is very important. Here are a few suggestions on "how you can help":

1. Don't rely on report cards alone for communication with the center. Make it a point to attend every regularly scheduled conference and visit when you can.
2. If grades are low, don't write off the child.
3. Praise your child warmly when grades are good. But don't forget to praise the things that don't show up on report cards.
4. If the report card reflects behavior different from what you see at home, remember that you are the primary expert on your own child. Find out what accounts for the difference in perceptions.
5. Find out exactly what goes into an assessment resulting in grades. If the system is not fair, join other parents in suggesting center-wide improvements.
6. When learning comes hard to a child and grades are always low, find other areas of competence to praise and encourage. In the long run, these skills may be more valuable than spelling.

BEST COPY AVAILABLE

APPENDIX K

NEWSLETTER SURVEY

Issue No. _____ Date _____

1. Was this issue to "TidBits for Parents" helpful and interesting?

   Yes _____ No _____

2. What was most interesting in this issue?

3. Would you like more information on a specific topic included in the next newsletter?

   Yes _____ No _____

   Topic _____

4. List information or topic you would like to see included in "TidBits for Parents".

Thank you.

Name _____

Address _____ Dayhome _____ Zip Code _____

Please return newsletter survey to your dayhome director. The director will forward the survey to Ms. Harmon.

APPENDIX L

ROLE PLAYING SURVEY

Pretest

I. Problem Situation (supplied by presentor)

II. Your Response

DISCUSSION AND NOTES

Posttest

I. Problem Situation

II. Most Appropriate Response (select one)

A.

B.

C.

Comments:

APPENDIX M

INSERVICE SESSION EVALUATION

I. Topic:

II. Was the material presented helpful to you?

Yes ___ No ___

III. What was most helpful to you of the information presented?

IV. Were the games helpful in demonstrating usefulness of material presented?

Yes ___ No ___

V. Was the film or slide presentation helpful? enjoyable?

Yes ___ No ___

VI. Please state any suggestions for future inservice sessions.

VII. How would you rate this workshop?

1 2 3 4 5 6
poor excellent

VIII. Would you be interested in attending upcoming workshops? Yes No

Name _____

Address _____Zip_____

IX. Would you recommend the inservice sessions to others?

Yes ___ No ___

Comments:

APPENDIX N

CO-EVALUATION

Name _____ Evaluator _____

Position _____ Date _____

Superior Performance	Acceptable Performance	Unacceptable Performance	Not Applicable
3	2	1	0

Professional Qualities

____ 1. Takes initiative and assumes responsibility.

____ 2. Adheres to school policy.

____ 3. Is punctual and responsible in attendance.

____ 4. Attends designated committees and meetings.

____ 5. Demonstrates interest in professional growth.

____ 6. Deals with paperwork promptly and efficiently.

____ 7. Behaves ethically with parents, staff and community.

____ 8. Cooperates with staff and administration.

____ 9. Accepts constructive criticism.

Classroom Management

____ 10. Keeps room reasonably neat and attractive.

____ 11. Helps children accept responsibility for their own behavior.

____ 12. Encourages children's participation.

____ 13. Creates an environment of cooperation and constructive effort.

____ 14. Demonstrates flexibility.

____ 15. Leads children toward self-control.

Program Development/Instructional Competency

____ 16. Recognizes and makes provisions for individual needs.

____ 17. Offers all children opportunities for success.

18. Provides appropriate activities for:

____ a. Cognitive development

____ b. Language development

____ c. Emotional development

____ d. Social development

____ e. Fine motor skills

____ f. Large motor skills

____ 19. Is well prepared on a daily basis.

____ 20. Incorporates a variety of media in instructional materials.

____ 21. Plans interesting activities.

____ 22. Offers developmentally appropriate activities and materials.

____ 23. Speaks clearly and distinctly.

____ 24. Uses evaluative measures to determine instructional effectiveness.

Personal Qualities

____ 25. Displays enthusiasm for teaching and a sense of humor.

____ 26. Is able to assume responsibility in an emergency.

____ 27. Relates positively to children and adults.

____ 28. Demonstrates tact, compassion and emphathetic concern for children and families.

____ 29. Dresses appropriately for working with young children.

____ 30. Is tolerant and considerate of differences in children and adults.

____ 31. Is able to evaluate own performance.

Specific strengths _____

_____

_____

_____

_____

Specific limitations _____

_____

_____

_____

_____

Goals or objectives _____

_____

_____

_____

_____

Signed _____ Signed _____
Staff Member Evaluator

_____

Adapted from Loretta M.
Hatfield, Ed.S., Child Development
Laboratory, Purdue University.

APPENDIX O

Session I February 16,1985 Presentor - Geraldine HARMON

INFANT TODDLER DEVELOPMENT

A G E N D A

9:00 Welcome and Introduction of Group

Benefits to YOU - Dayhome Administrator, staff and parents

PRETEST

Session I training booklet

9:30 The Neonate - Physiological Stability
Responsiveness to Stimulation
Learning

Early Infancy

10:00 Theories of Learning - Arnold Gesell/Maturational Theory
B.F. Skinner/Behavioral Theory
Erik Erikson/Psychoanalytic Theory
Jean Piaget/Cognitive Theory

10:30 B R E A K B R E A K B R E A K B R E A K

10:45 Areas of Development

Development of the Infant

Development of the Toddler

11:15 Activities for the Participant (Developmental Chart)

Filmstrips - Infant as a Person

Toddler

11:30 Study Questions I/Independent Reading Article

POSTTEST

Evaluation - Please hand in before you leave

Session II March 16, 1985 Presentor - Geraldine Harmon

ASSESSMENT AND AGE APPROPRIATE CURRICULUM/MATERIAL SELECTION

A G E N D A

9:00 Welcome and Introduction of Group

Formal Logs - Discussed & Completed for Session II

Notebook Organization

PRETEST

9:30 Areas of Development

Patterns of Growth

10:00 Study Questions I

Role Playing/Surveys Completed

10:30 B R E A K

10:45 Developmental Bingo - Game (Toys given away !!)

Assessment of Young Children

Growth Profile - Developmental Skills Lists

11:15 Age Appropriate Curriculum/Material Selection

Infant Stimulation Curriculum (Sample curriculum)

Please feel free to ask questions at any time. This inservice series has been designed to be a fun-filled learning experience. I hope the information and materials will be beneficial.

POSTTEST

Study Questions II/Independent Reading Article

Evaluation - Please hand in <u>before</u> you leave

Session III April 13, 1985 Presentor - Geraldine Harmon

HEALTH, NUTRITION AND THE IMPORTANCE OF PLAY

A G E N D A

9:00 Welcome and Introduction of Group

Formal Logs - Session III entry

Notebook Organization

Session II Review

9:45 PRETEST

Health and the Young Child

Nutrition and the Young Child

Methods of Record Keeping

10:45 BREAK BREAK BREAK

11:00 The Importance of Play

Nutritious Meals and Snacks

POSTTEST

Study Questions III/Independent Reading Article

Evaluation - Please hand in <u>before</u> you leave

Please feel free to ask any question at any time. This inservice series has been designed to be a fun-filled learning experience. I hope the information and materials will be beneficial.

Session IV May 11, 1985 Presentor - Geraldine Harmon

PARENT-TEACHER PARTNERSHIPS

A G E N D A

9:00 Welcome and Socializing with Group

Formal Logs - Discussion & Entries Noted

Notebook Organization

PRESTEST

9:30 Caregiver - Parent Partnerships

Structuring Your Business for Success

A. KNOW YOUR CHILDREN

1. Parent Information
2. Records
3. Observations

B. KNOW YOUR CLIENTELE

1. Interviews
2. Correspondence/Conversations
3. Parent Meetings/Newsletters

C. KNOW YOUR BUSINESS

1. Recordkeeping
2. Services
3. Respect

10:30 B R E A K

10:45 Promoting Family Day Care

11:00 Session Reviews Through Gaming

Theory Trivia
Developmental Bingo
Problem Solving - Role Playing

11:45 Study Questions IV/Independent Reading

POSTTEST/Evaluation (hand in before you leave)

APPENDIX P

PRETEST - POSTTEST

Date _____

INFANT/TODDLER DEVELOPMENT

1. A neonate is a baby ape. (circle one)

   True False.

2. The neonatal period extends from

   a. 3 to 6 months

   b. 6 to 9 months

   c. 0 to 4 weeks

   d. 0 to 3 months

3. All babies are born with certain "reflexes".

   True False

4. Jean Piaget focused his research and writing on which developmental area?

   a. Social-emotional

   b. Motor

   c. Cognitive

   d. Language

5. Erik Erikson focused his research and writing on which developmental area?

   a. Social-emotional

   b. Motor

   c. Language

   d. Cognitive

6. List four developmental areas.

7. Name two <u>theories of developmental learning</u>.

8. Match the following:

Maturational Theory	Jean Piaget
Behavioral Theory	Erik Erikson
Psychoanalytic Theory	Arnold Gesell
Cognitive-Developmental Theory	B.F. Skinner

circle one (parent/caregiver) Score_____

PRETEST - POSTTEST

Date _____

ASSESSMENT AND AGE APPROPRIATE CURRICULUM/
MATERIAL SELECTION

1. Developmental milestones are

   a. mineral deposits found in young children's bodies

   b. test scores

   c. skills mastered along the path from infancy to maturity

   d. growing up

   e. none of the above

2. List four areas of development.

3. List the two rules underlying growth.

4. A growth profile is

   a. a child's weight and height measurements

   b. a child's work samples

   c. a teacher's understanding of the child's strengths and weaknesses

   d. test scores

   e. none of the above

5. List three (3) sources of information for a growth profile.

6. The main purpose of activities is to

   a. Keep children busy

   b. to please parents

c. to help children learn and grow in their own special way

d. to teach

7. What is <u>the</u> sign that an activity is <u>not</u> age appropriate?

PRETEST - POSTTEST

Date _____

HEALTH, NUTRITION and the IMPORTANCE
of PLAY

1. List the four basic food groups.

2. By serving a variety of foods of the right kind and in the right amounts, you can help your young child get to know and like the foods needed throughout life.

   True False

3. It is important to keep records of your monthly dayhome menu - the Monthly Nutrition Record.

   True False

4. State one reason why records on the monthly menu should be kept.

5. Several broad changes can be seen in children's play as they grow toward maturity. (Here's one for extra credit!)

   True False

TRAINING SERIES PRETEST/POSTTEST

Date _____

PARENT/CAREGIVER PARTNERSHIPS

1. Match the following:

Maturational Theory	Jean Piaget
Behavioral Theory	Erik Erikson
Cognitive Theory	B.F. Skinner
Psychoanalytic Theory	Arnold Gesell

2. Match the following:

a. He's ready to learn.	Cognitive Theory
b. It is better to feed a baby on demand than on a schedule.	Behavioral Theory
c. You may watch TV after you finish your homework.	Maturational Theory
d. Children are active learners.	Psychoanalytic Theory

3. List <u>four</u> developmental areas.

4. What is <u>the</u> sign that an activity is not age appropriate?

5. Very young children learn <u>best</u> through _____.

   a. books

   b. experience

   c. play

   d. all of the above

6. Immunization of young children is no longer necessary.

TRUE FALSE

7. List the four basic food groups.

8. What do the letters DPT stand for?

9. In an effort to provide for optimal development of young children, the family dayhome caregiver must know the following:

   a. child's age, birthdate, telephone number

   b. licensing regulations, emergency information, parents

   c. your children, clientele, business

   d. nutrition records, immunization records, case history records

10. One of the most rewarding careers is _____.

NOTE: Only one point per question. Good luck!

Circle one (parent/caregiver) Score_____

APPENDIX Q

Theory Trivia
****

Score _____ Date _____

Circle One

Parent/Caregiver

I. Common statements based on the four learning theories we have just gone over will be read one at a time. You are to determine which learning theory the statement read is reflective of and answer with a notation on this sheet. The person with the most correct responses wins the game. The game will be played in sets of five statements each.

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
14.
15.

APPENDIX R

DEVELOPMENTAL CHART

As the description of Keith's first year of life is read, list, on the chart below, three (3) observations for each age level mentioned.

3 months	5 months	8 months
9 months	10 months	one year

1. Is Keith an "average" infant?
2. Are there any "problems" you can point out?
3. What area(s) of development show strength(s)/weakness(es)?

Infant-Toddler Development Training Series

Session I

Infant/Toddler Development

February 16, 1985
GNS Complex
300 W. 21st Ave.
9:00 am - 12 noon

Enjoy a rewarding learning experience!

Geraldine Harmon
Ed.D. Early Childhood Candidate
(219) 884-6794

Infant-Toddler Development Training Series

Session II

Assessment and Age Appropriate Curriculum/Material Selection

March 16, 1985
GNS Complex
300 W. 21st Ave.
9:00 am – 12 noon

Enjoy a rewarding learning experience!

Geraldine Harmon
Ed.D. Candidate
(219) 884-6794

Infant-Toddler Development Training Series

Session III

Health, Nutrition and the Importance of Play

April 13, 1985
GNS Complex
300 W. 21st Ave.
9:00am - 12 noon

Enjoy a rewarding learning experience!

Geraldine Harmon
Ed.D. Candidate
(219) 884-6794

Infant-Toddler Development Training Series

Session IV

Parent-Caregiver Partnerships

May 11, 1985
GNS Complex
300 W. 21st Ave
9:00 am - 12 noon

Prizes — Certificates to be Awarded — Games

Presentor - G. Harmon - Presentor

APPENDIX T

DEVELOPMENTAL BINGO

Listen to the skill read to you. Write down the age at which a child should have mastered the skill. The person with the most ages correctly listed wins the game.

1. 6.
2. 7.
3. 8.
4. 9.
5. 10.

Listen to the skill read to you. Write down the developmental area the skill would be categorized under. Ex. The child's vocabulary should include 100 to 250 words. (Language Development) The person identifying the most developmental areas correctly wins the game.

1. 9.
2. 10.
3. 11.
4. 12.
5. 13.
6. 14.
7. 15.
8. 16.

DEVELOPMENTAL BINGO GRID

1 mo.	20 mos.	18 mos.
30 mos.	10 mos.	24 mos.
15 mos.	11 mos.	3 mos.

DEVELOPMENTAL BINGO GRID

15 mos.	12 mos.	6 mos.
4 mos.	36 mos.	8 mos.
9 mos.	2 mos.	5 mos.

APPENDIX V

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